



APPLICATION ACCEPTED: May 16, 2014
BOARD OF ZONING APPEALS: October 1, 2014
@ 9:00 A.M.

County of Fairfax, Virginia

September 24, 2014

STAFF REPORT

SPECIAL PERMIT SP 2014-MA-070

MASON DISTRICT

APPLICANT: Karina I. Suaznabar/Melody Day Care, Inc.
ZONING: R-3
SUBDIVISION: Lincolnia Heights
ADDRESS: 6346 Hillcrest Place, Alexandria, VA, 22312
TAX MAP REFERENCE: 72-1 ((7)) 65
ZONING ORDINANCE PROVISION: 8-305
LOT SIZE: 10,500 square feet
SPECIAL PERMIT PROPOSAL: To permit a home child care facility.

STAFF RECOMMENDATION:

Staff recommends approval of Special Permit SP 2014-MA-070 for a home child care facility subject to the proposed development conditions contained in Appendix 1.

It should be noted that it is not the intent of staff to recommend that the Board of Zoning Appeals, in adopting any conditions, relieve the applicant/owner from compliance with the provisions of any applicable ordinances, regulations, or adopted standards.

It should be further noted that the content of this report reflects the analysis and recommendations of staff; it does not reflect the position of the Board of Zoning Appeals (BZA). A copy of the BZA's Resolution setting forth this decision will be mailed within five days after the decision becomes final.

The approval of this special permit does not interfere with, abrogate or annul any easement, covenants, or other agreements between parties, as they may apply to the property subject to this application.

For additional information, call Zoning Evaluation Division, Department of Planning and Zoning at 324-1280, 12055 Government Center Parkway, Suite 801, Fairfax, Virginia 22035. **Board of Zoning Appeals' meetings are held in the Board Room, Ground Level, Government Center Building, 12000 Government Center Parkway, Fairfax, Virginia 22035-5505.**

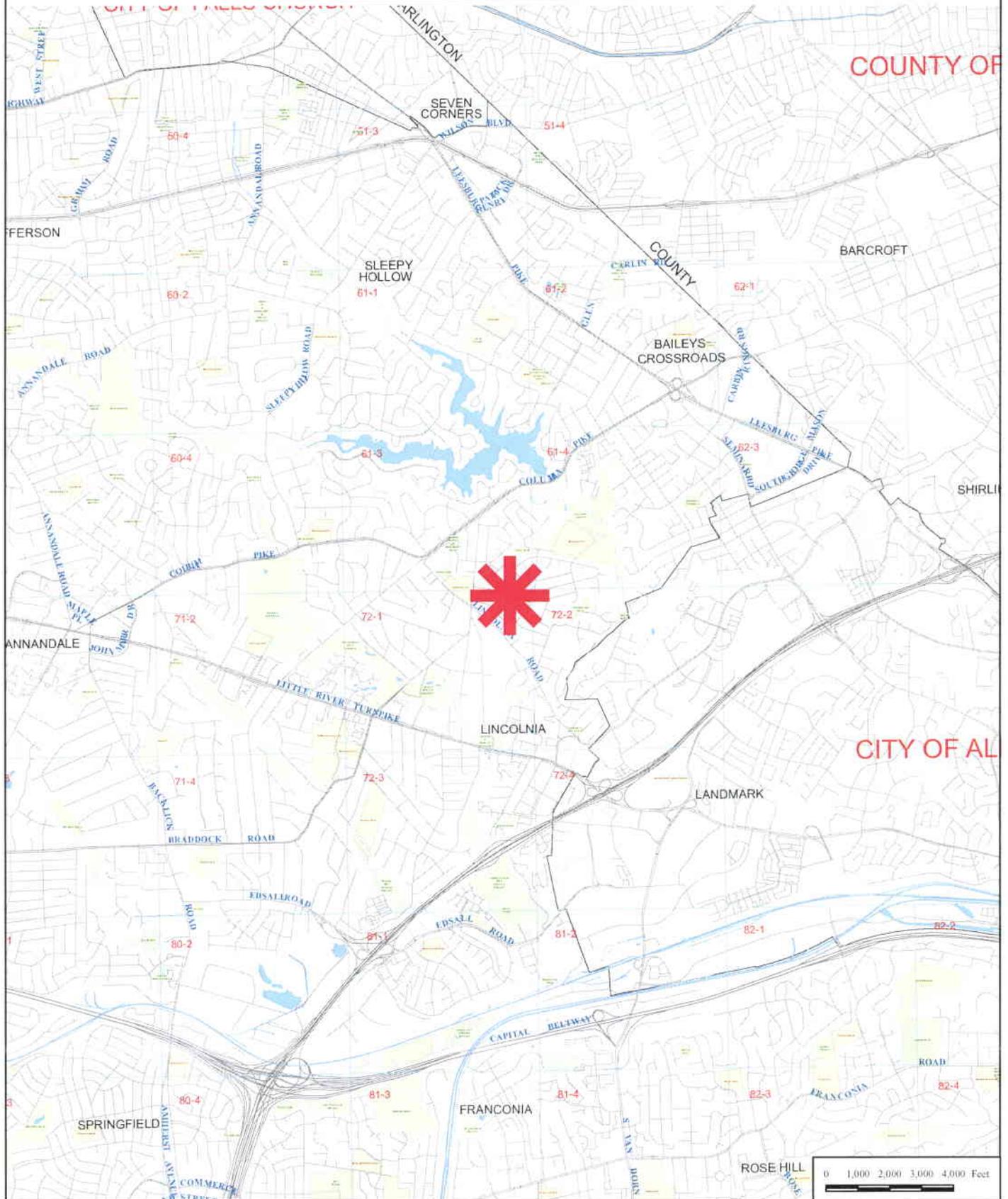


Americans with Disabilities Act (ADA): Reasonable accommodation is available upon 48 hours advance notice. For additional information on ADA call (703) 324-1334 or TTY 711 (Virginia Relay Center).

Special Permit

SP 2014-MA-070

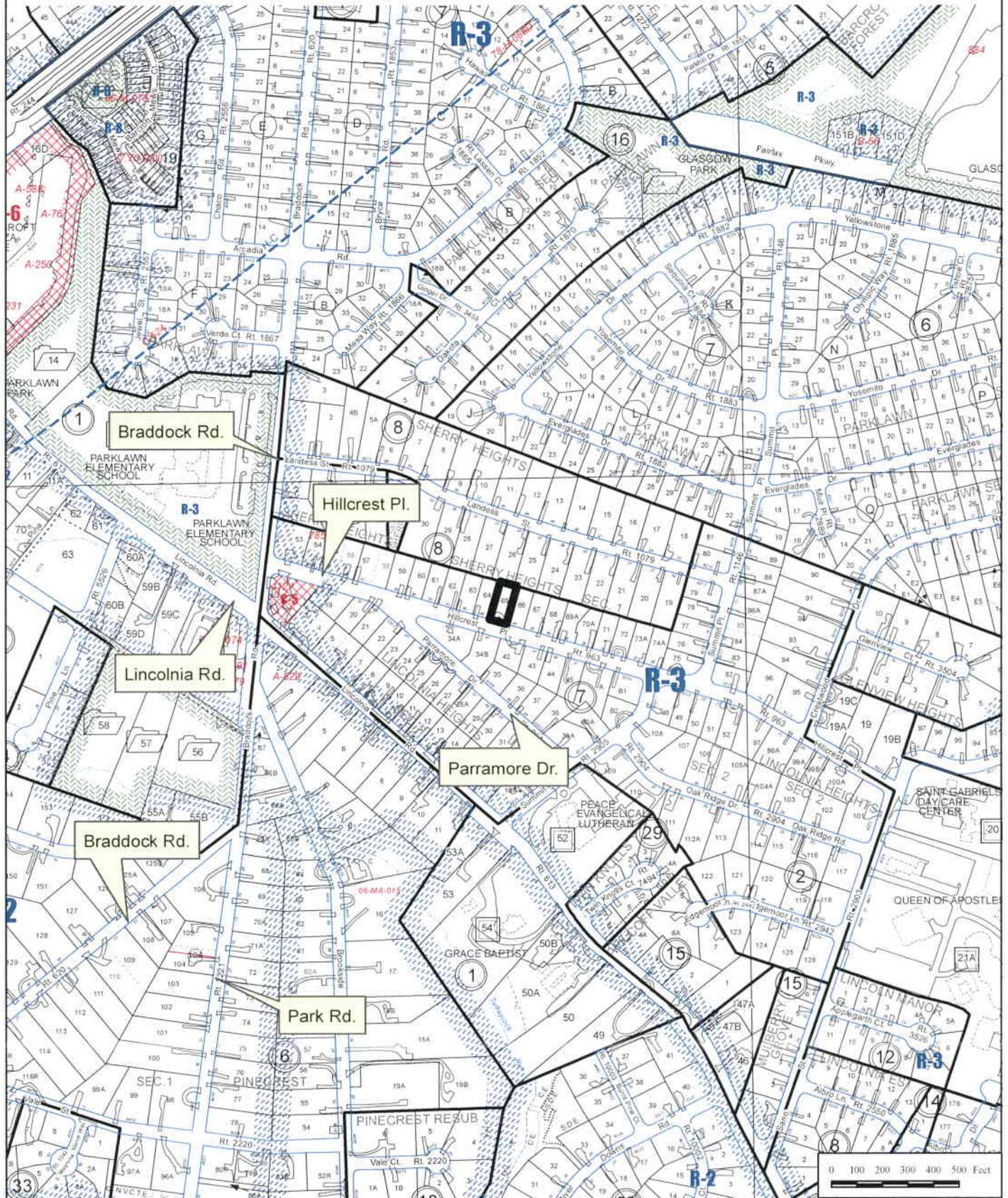
KARINA I. SUAZNABAR MELODY DAYCARE



Special Permit

SP 2014-MA-070

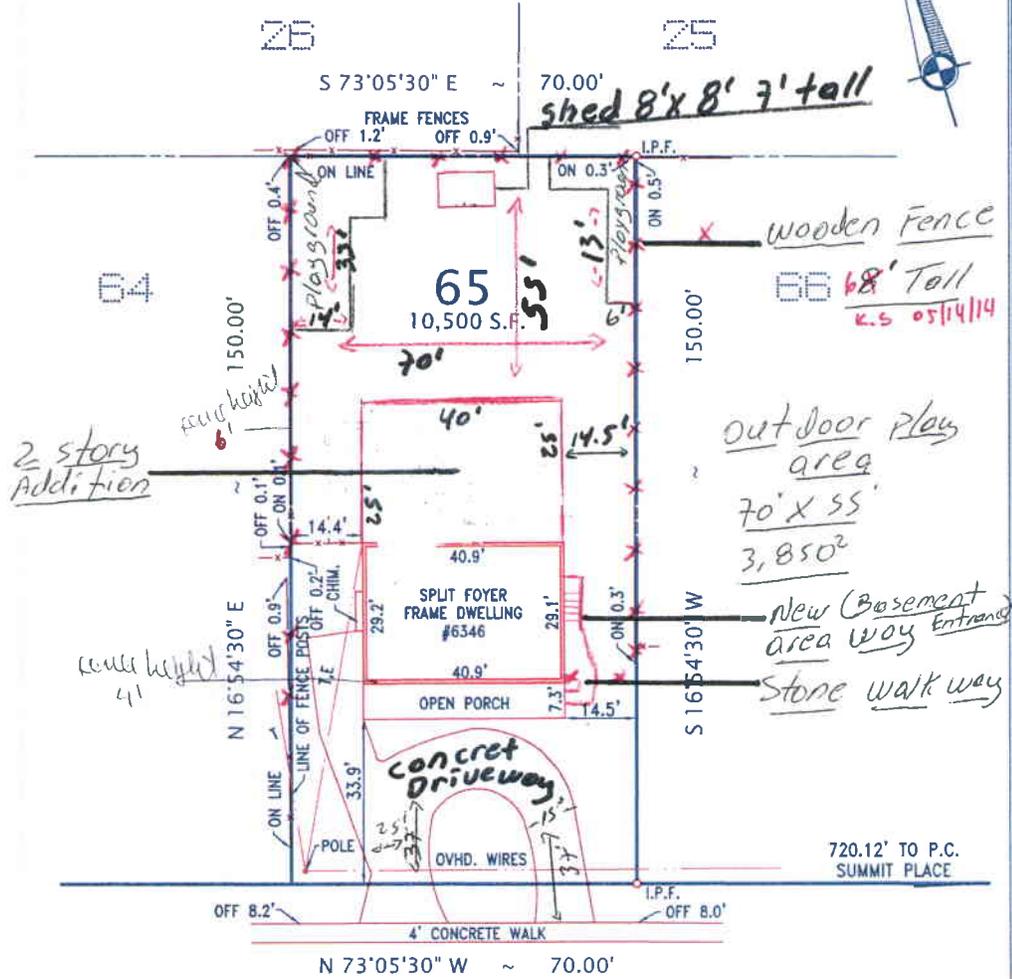
KARINA I. SUAZNABAR MELODY DAYCARE



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SHERRY HEIGHTS SECTION ONE



HILLCREST PLACE

60' R/W

PLAT

SHOWING HOUSE LOCATION ON

LOT 65

LINCOLNIA HEIGHTS

FAIRFAX COUNTY, VIRGINIA

SCALE: 1" = 30'

JULY 1, 2008

04/29/14

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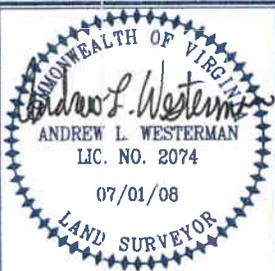
FEB 19 2014

Zoning Evaluation Division

CASE NAME:

WELLS FARGO BANK ~ SUAZNABAR

GRAPHIC SCALE



BY PROVISIONS OF THE VIRGINIA CODE: NO CORNER MARKERS SET, BOUNDARY SURVEY NOT PERFORMED. PLAT SUBJECT TO RESTRICTIONS OF RECORD, TITLE REPORT NOT FURNISHED.

I HEREBY CERTIFY THAT THE POSITIONS OF ALL THE EXISTING IMPROVEMENTS HAVE BEEN CAREFULLY ESTABLISHED BY A CURRENT FIELD SURVEY, AND UNLESS OTHERWISE SHOWN, THERE ARE NO VISIBLE ENCROACHMENTS.

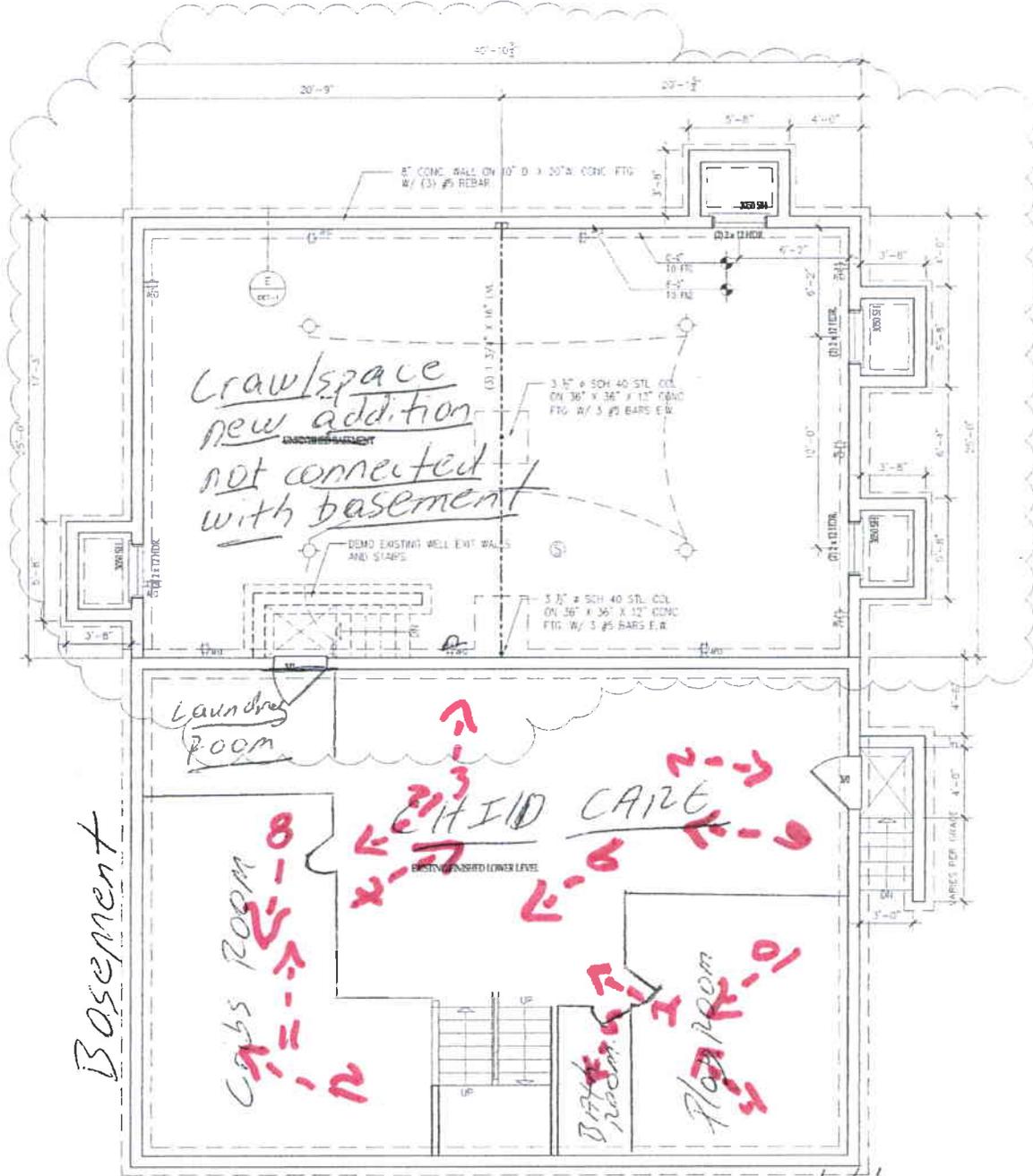
REQUESTED BY:

REALTY OF TYSONS, INC.

ALEXANDRIA SURVEYS
INTERNATIONAL, LLC

6210 NORTH KINGS HIGHWAY ALEXANDRIA, VIRGINIA 22303
TEL. NO. 703-660-6615 FAX NO. 703-768-7764

Interior Photos Home child care



Rooms used for home child care facility.

FOUNDATION PLAN
SCALE: 1/4" = 1'-0"

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1- child care area.

02/11/2014

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2 - child care entrance.

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3. - child care area.

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4.- child care area.

02/14/2014

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05- Bathroom for childrens and parents.

02/11/2014

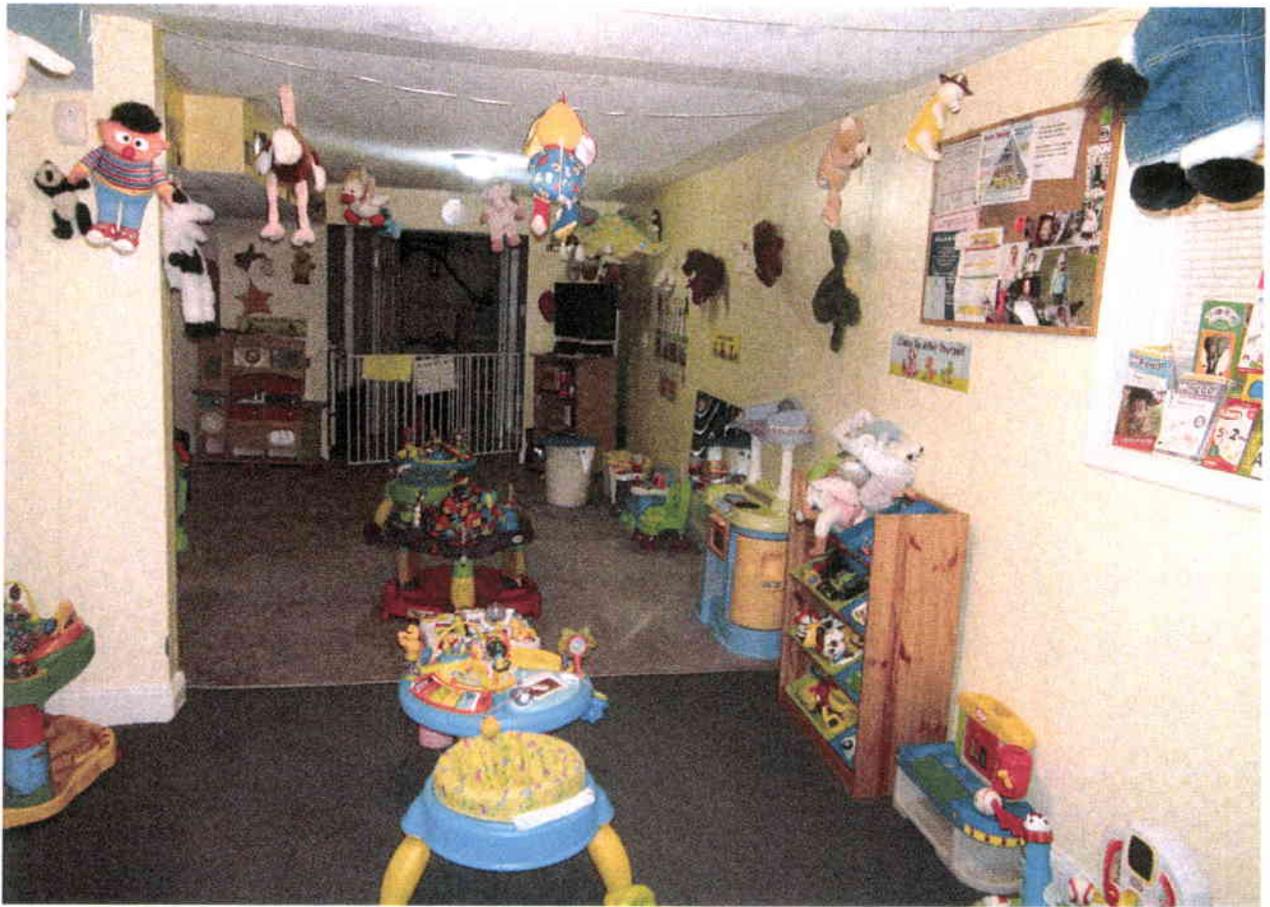
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S:- Bathroom for children and parents.

02/14/2014

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6- child core area.-

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7.- child care area

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8.7 Cribs Room.

02/11/2014

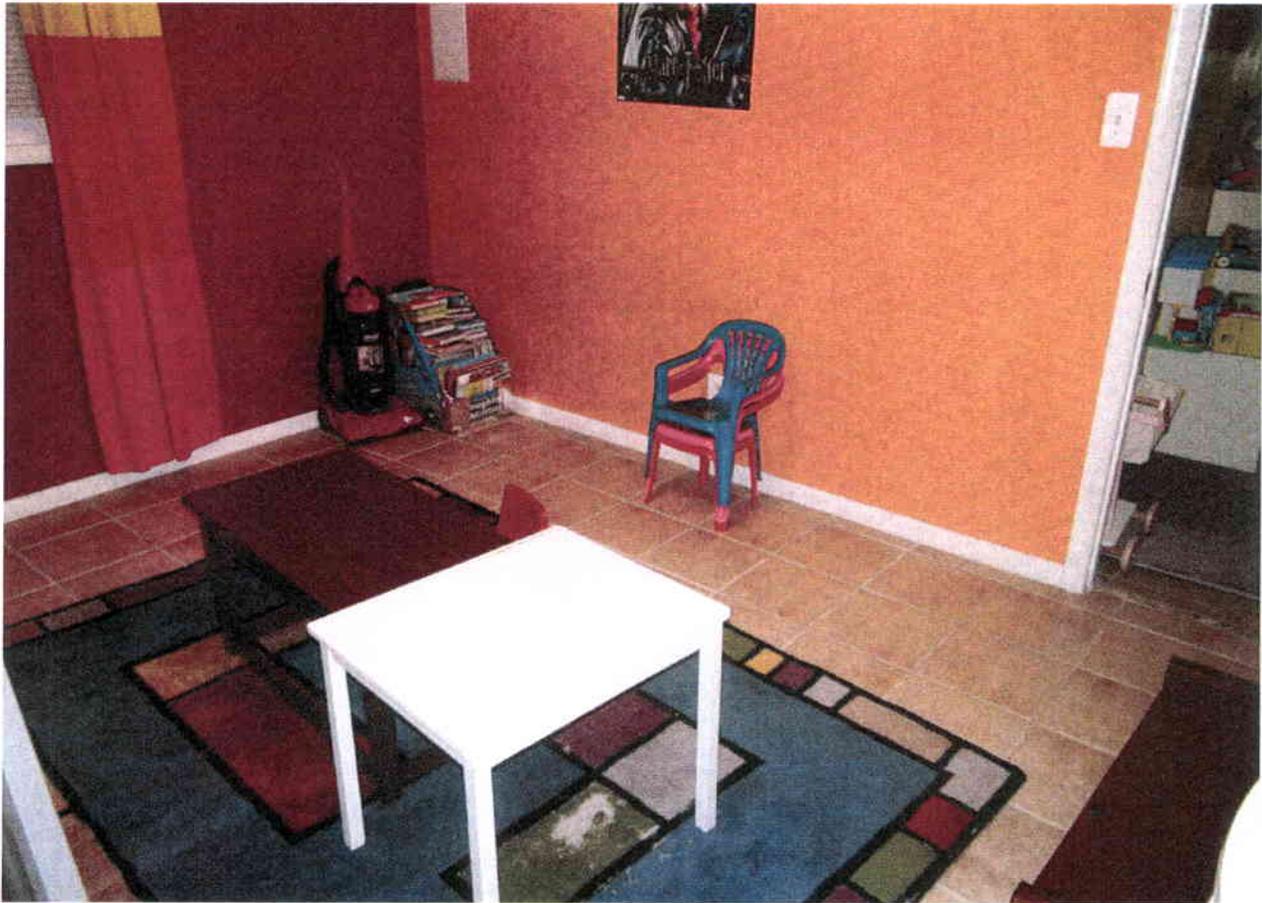
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9.- child care area

02/14/2014

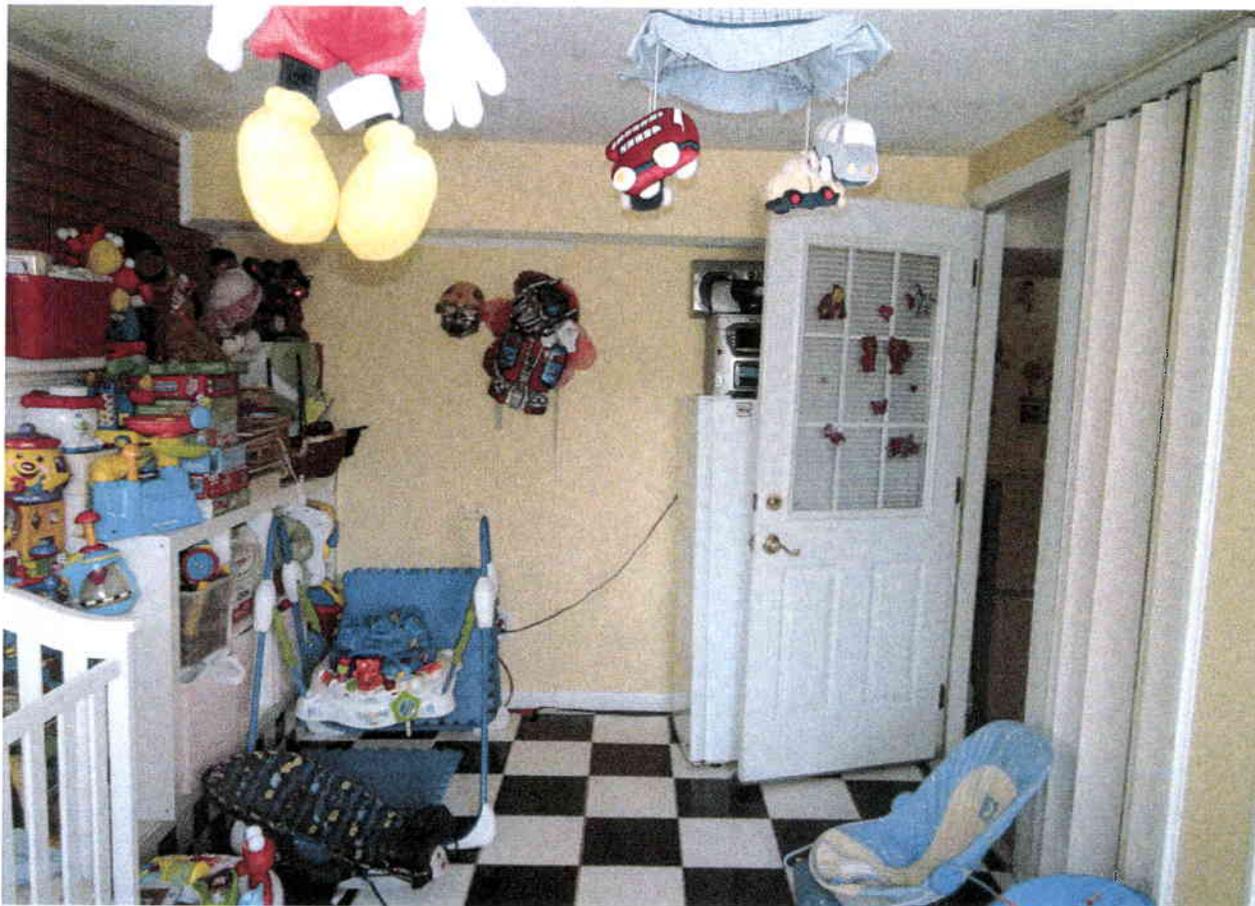
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10. - play room.

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11.- cribs room.

02/14/2014

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11- Entrance to crib room.

02/14/2014

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12 - cribs room.

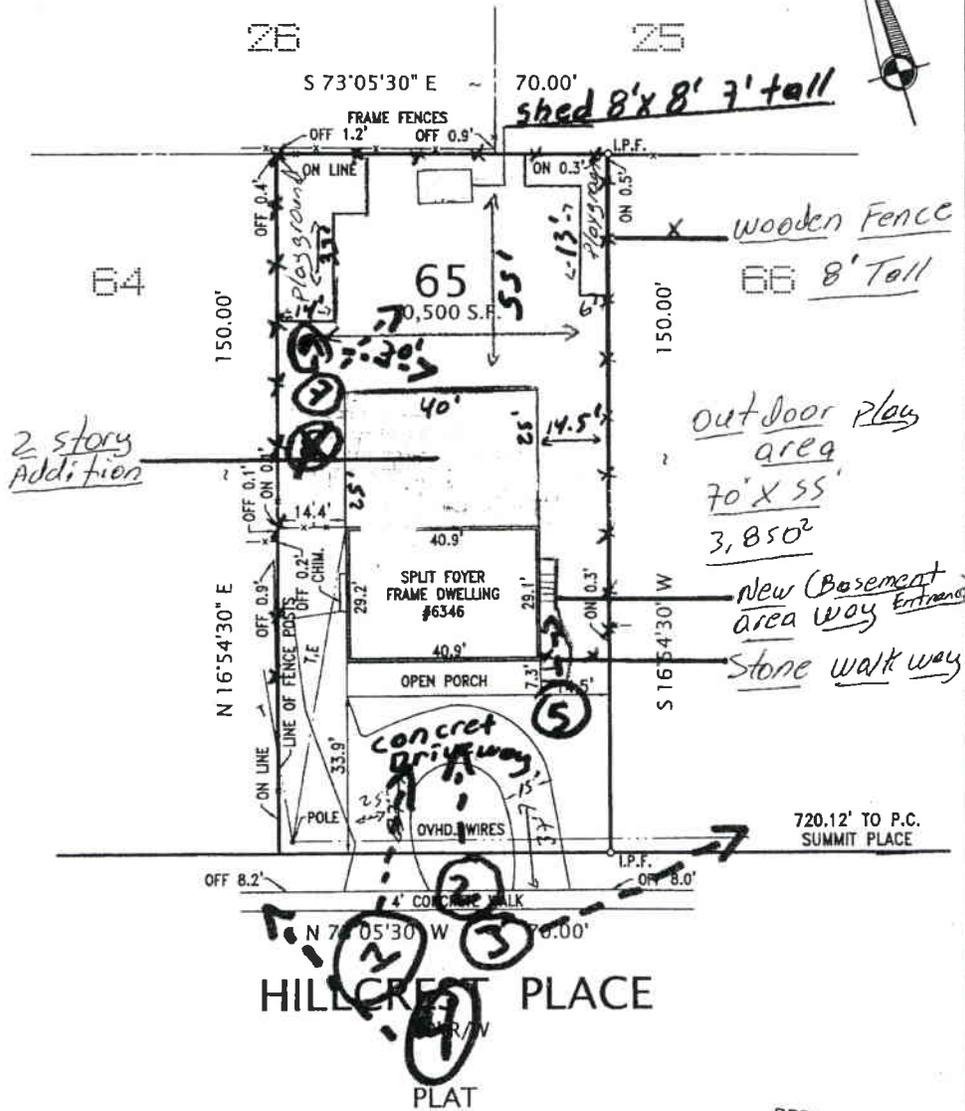
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SHERRY HEIGHTS SECTION ONE



SHOWING HOUSE LOCATION ON LOT 65

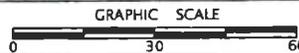
LINCOLNIA HEIGHTS

FAIRFAX COUNTY, VIRGINIA

SCALE: 1" = 30' JULY 1, 2008

RECEIVED
Department of Planning & Zoning
FEB 19 2014
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CASE NAME: WELLS FARGO BANK ~ SUAZNABAR



BY PROVISIONS OF THE VIRGINIA CODE: NO CORNER MARKERS SET, BOUNDARY SURVEY NOT PERFORMED. PLAT SUBJECT TO RESTRICTIONS OF RECORD, TITLE REPORT NOT FURNISHED.

I HEREBY CERTIFY THAT THE POSITIONS OF ALL THE EXISTING IMPROVEMENTS HAVE BEEN CAREFULLY ESTABLISHED BY A CURRENT FIELD SURVEY, AND UNLESS OTHERWISE SHOWN, THERE ARE NO VISIBLE ENCROACHMENTS.

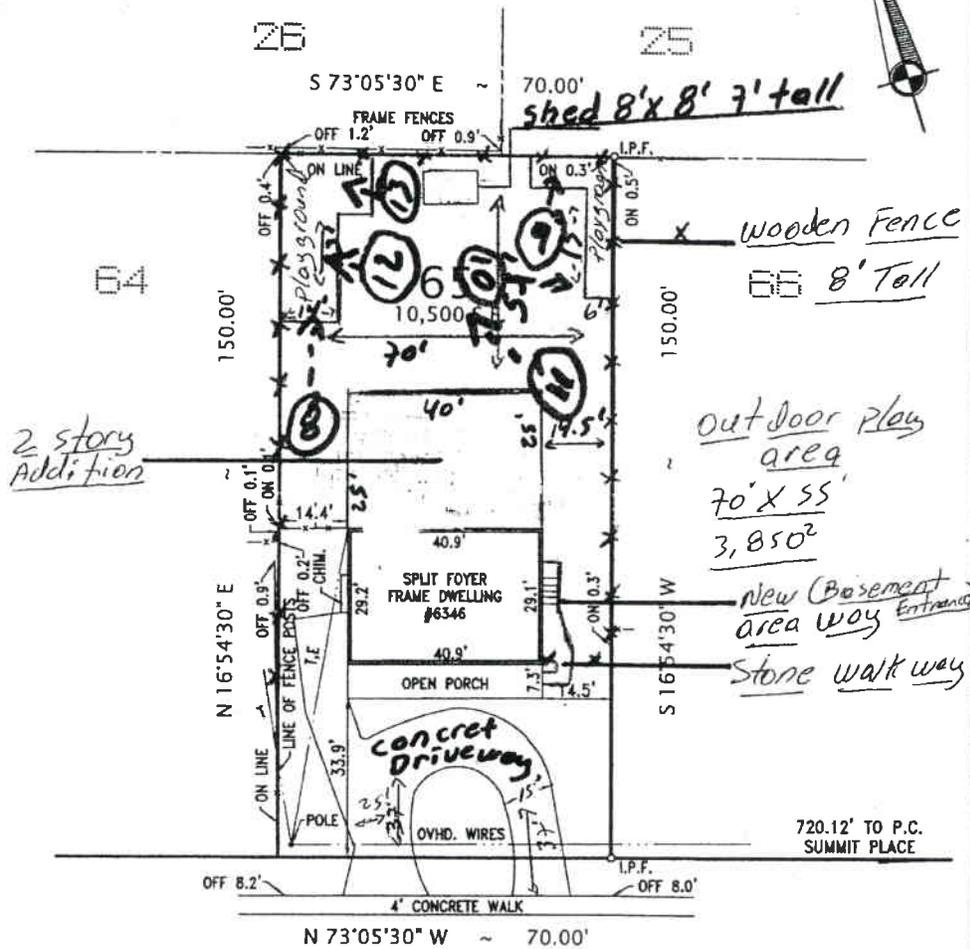
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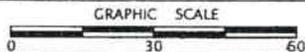


HILLCREST PLACE 60' R/W

PLAT
 SHOWING HOUSE LOCATION ON
 LOT 65
LINCOLNIA HEIGHTS
 FAIRFAX COUNTY, VIRGINIA
 SCALE: 1" = 30' JULY 1, 2008

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 TEL. NO. 703-660-6615 FAX NO. 703-768-7764



1. Across the street at Hillcrest Place.

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2. From concrete walk.

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3. Neighbor left side of the house

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4. Neighbor right side of house

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S. Basement Entrance.

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6. Property Photo from Back side.

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7. Play Area.

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8. Play Area.

02/11/2014

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9. Play Ground Equipment

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10. Play Ground

02/11/2014

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11. Play Area.

02/11/2014

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12 Play Ground Equipment.
02/11/2014

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Zoning Evaluation Division



13. Play Ground Equipment.
02/11/2014

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SPECIAL PERMIT REQUEST

The applicant, Karina I. Suaznabar/Melody Day Care, Inc., requests a special permit approval to operate a home child care facility for up to 12 children at any one time in a single family detached dwelling. The Zoning Ordinance permits home child care providers to care for up to seven children at any one time by-right in a single family detached dwelling. Since up to 12 children are proposed, special permit approval is required. Figure 1 depicts the subject property.

A copy of the special permit plat entitled "Plat Showing House Location on Lot 65 Lincolnia Heights," prepared by Andrew L. Westerman of Alexandria Surveys, dated July 1, 2008 and revised on April 29, 2014 by Karina I. Suaznabar, the applicant, is provided at the front of this report.



Figure 1: Subject property

CHARACTER OF THE SITE AND SURROUNDING AREA

The subject property is developed with a one-story single family detached dwelling with a two-story addition in the rear. The child care entrance to the walk-out basement is located on the eastern side of the dwelling. An open porch and semi-circular concrete driveway are located in the front portion of the home. An outdoor play area and play equipment are located in the rear of the property. The subject property is not part of a homeowners association.

The property is located north of Lincolnia Road, south of Landess Street, east of Parklawn Elementary School, and west of Queen of Apostles Church. The surrounding uses are residential and developed with single family detached homes.

BACKGROUND AND HISTORY

On March 31, 1964 and on April 1, 1964, a certificate of occupancy and a building permit were issued for a single family dwelling on the subject property, respectively. On June 21, 1973, a building permit was issued for a 512 square foot swimming pool (16 feet x 32 feet) in the rear yard on the subject property; however, a pool no longer exists on the property. On July 23, 1998, a building permit was approved to permit an open front porch 12 feet in height. On October 27, 2004, a building permit was approved to permit a two-story addition at the rear of the dwelling, a front foyer addition, and replacement of the existing kitchen with a new kitchen. On February 19, 2014, the applicant's special permit application was received by the Zoning Evaluation Division for a home child care facility at the subject property and on May 16, 2014, the application was accepted. On September 16, 2014, the applicant obtained electrical, plumbing, and interior alteration permits for the second kitchen and bathroom in the basement. A copy of the above referenced permits is provided as Appendix 4.

On April 9, 2014, a Notice of Violation (NOV) was issued by the Department of Code Compliance for a home child care facility with 11 children at the subject property. However enforcement of the NOV is on hold pending approval of this special permit application, which would remedy the violation.

COMPREHENSIVE PLAN PROVISION

Plan Area: Baileys Planning District, Area I
Planning Sector: Glasgow Community Planning Sector (B4)
Plan Map: Residential, 2-3 dwelling units per acre

DESCRIPTION OF THE APPLICATION

The applicant requests approval of a special permit for a home child care facility for up to 12 children at any one time. The applicant has a state license that permits care of children from 2 months to 12 years 11 months in age and the license is valid through April 8, 2015. Currently, the applicant cares for nine children less than three years in age. A record of the state license is provided as Appendix 5.

The home child care is located in the basement of the subject single family detached dwelling and comprises the entire use of the basement with exception to the laundry room. The home child care contains approximately 1,131 square feet and consists of a child care area for meals and activities with a kitchen area that contains a stove, sink, toaster oven, and microwave; a room with cribs for sleeping; a playroom; and a bathroom. There is direct egress/ingress access from the child care area to the fenced-in outdoor play area located in the rear of the property. This area contains approximately 3,850 square feet and consists of the following: one swing set and slide,

two slide sets for children ages two years and older, one slide for children one year in age, two playhouses, two activities tables, one basketball set, one climb on truck set, five ride-on toys, and one sandbox. Parking is provided in the existing semi-circular driveway where six vehicles can be parked. In addition, on-street parking is available.

The hours of operation are from 7:00 a.m. to 6:00 p.m., Monday through Friday with staggered arrival and departure times. Arrival times are between 7:00 a.m. to 10:00 a.m. and departure times are between 2:30 p.m. to 6:00 p.m. The applicant has two full-time assistants, which are proposed to remain, whose hours are from 7:00 a.m. to 6:00 p.m., Monday through Friday.

ZONING ORDINANCE PROVISIONS

The following provisions from the Zoning Ordinance are applicable:

- Sect. 8-006, General Special Permit Standards
- Sect. 8-303, All Group 3 Uses
- Sect. 8-305, Additional Standards for Home Child Care Facilities
- Par. 6 of Sect. 10-103, Limitations of Home Child Care Facilities

This special permit is subject to the referenced sections of the Zoning Ordinance and a copy of the provisions are provided as Appendix 7.

ANALYSIS

Parking and Transportation

Hillcrest Place is a public street that is accessible from Braddock Road to the west and Summit Place to the east. As indicated in the applicant's statement of justification and as previously stated, the arrival and departure times for the children are staggered with arrival times between 7:00 a.m. to 10:00 a.m. and departure times between 2:30 p.m. to 6:00 p.m.

Parking for drop-off and pick-up related to the home child care use is available in the semi-circular driveway in front of the home. The applicant states that the driveway provides parking for up to six vehicles. According to County air photography, the driveway was in existence in 1997 and preceded the adoption of a Zoning Ordinance Amendment in 2002, which restricted front yard coverage to no more than 30% in the front yard of a single family detached dwelling in the R-3 District, which the subject property is zoned. Therefore, the driveway was established before the change to the Zoning Ordinance. Figure 2 shows the driveway from a County air photograph from 1997. In addition to the semi-circular driveway, on-street parking is available. In staff's opinion, the home child care use will not be hazardous or conflict with the existing

neighborhood traffic and there is adequate parking to accommodate the temporary parking associated with the proposed home child care facility.



Figure 2: Semi-circular driveway in existence since 1997.

Home Child Care Facility Site Inspection

A site inspection of the home child care facility was conducted on August 15, 2014, by staff and an inspector from the Zoning Inspection Branch. During this inspection, it was observed that a room in the basement (the crib room) is being used for sleeping. Rooms used for sleeping must provide two means of exit with one that leads directly to the outside. The window in the crib room where children sleep was measured to be 47 inches from the window sill to the floor and exceeds the maximum height of 44 inches. The applicant also was advised to provide clear access to the window by relocating the crib in front of the window. To address these issues, staff has proposed a development condition requiring conformance with the Virginia Uniform Statewide Building Code. A copy the home child care site inspection report is provided as Appendix 6.

CONCLUSION AND RECOMMENDATION

In staff's opinion, the proposed home child care facility for up to 12 children at any one time at the subject property is in harmony with the Comprehensive Plan and applicable Zoning Ordinance provisions with the adoption of the proposed development conditions contained in Appendix 1.

Staff recommends approval of SP 2014-MA-070, subject to the proposed development conditions contained in Appendix 1.

It should be noted that it is not the intent of staff to recommend that the Board of Zoning Appeals, in adopting any conditions, relieve the applicant/owner from compliance with the provisions of any applicable ordinances, regulations, or adopted standards. The approval of this application does not interfere with, abrogate or annul any easements, covenants, or other agreements between parties, as they may apply to the property subject to this application.

It should be further noted that the content of this report reflects the analysis and recommendations of staff; it does not reflect the position of the Board of Zoning Appeals.

APPENDICES

1. Proposed Development Conditions
2. Affidavit
3. Statement of Justification
4. Building Permits
5. Record of Home Child Care License
6. Zoning Inspection Report
7. Zoning Ordinance Provisions

PROPOSED DEVELOPMENT CONDITIONS**Special Permit SP 2014-MA-070****September 24, 2014**

If it is the intent of the Board of Zoning Appeals to approve Special Permit SP 2014-MA-070 located at Tax Map 72-1 ((7)) 65 to permit a home child care facility pursuant to Sect. 8-305 of the Fairfax County Zoning Ordinance, staff recommends that the Board of Zoning Appeals condition the approval by requiring conformance with the following development conditions:

1. This approval only is granted to the applicant, Karina I. Suaznabar, and is not transferable without further action by the Board of Zoning Appeals, and is for the location indicated on the application, 6346 Hillcrest Place, and is not transferrable to other land.
2. This special permit is granted only for the home child care use indicated on the plat entitled "Plat Showing House Location on Lot 65 Lincolnia Heights," as prepared by Andrew L. Westerman, and revised by Karina I. Suaznabar on April 29, 2014, and approved with this application, as qualified by these development conditions.
3. A copy of this Special Permit **SHALL BE POSTED IN A CONSPICUOUS PLACE ON THE PROPERTY** of the use and be made available to all departments of the County of Fairfax during the hours of operation of the permitted use.
4. The maximum hours of operation of the home child care facility shall be limited to 7:00 a.m. to 6:00 p.m., Monday through Friday.
5. The dwelling that contains the child care facility shall be the primary residence of the applicant.
6. The maximum number of children on-site at any one time shall be 12, excluding the applicant's own children.
7. The maximum number of assistants for the home child care facility shall be two.
8. All drop-off and pick-up of children related to the home child care facility shall take place in the driveway of the property.
9. There shall be no signage associated with the home child care facility.
10. All outdoor play equipment shall conform to all applicable state regulations and standards.

11. Room(s) used for sleeping shall provide two means of exit, one which leads directly to the outside, and shall be in conformance with the Virginia Uniform Statewide Building Code.

This approval, contingent upon the above-noted conditions, shall not relieve the applicant from compliance with the provisions of any applicable ordinance, regulations, or adopted standards.

Pursuant to Sect. 8-015 of the Zoning Ordinance, this special permit shall automatically expire, without notice, six months after the date of approval unless the use has been established as outlined above. The Board of Zoning Appeals may grant additional time to establish the use if a written request for additional time is filed with the Zoning Administrator prior to the date of expiration of the special permit. The request must specify the amount of additional time requested, the basis for the amount of time requested, and an explanation of why additional time is required.

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

SPECIAL PERMIT/VARIANCE AFFIDAVIT

DATE: April 27, 2014
(enter date affidavit is notarized)

124457

I, KARINA I. SUAZNABAR, do hereby state that I am an
(enter name of applicant or authorized agent)

(check one) applicant
 applicant's authorized agent listed in Par. 1(a) below

and that, to the best of my knowledge and belief, the following is true:

1(a). The following constitutes a listing of the names and addresses of all **APPLICANTS, TITLE OWNERS, CONTRACT PURCHASERS, and LESSEES** of the land described in the application,* and, if any of the foregoing is a **TRUSTEE,**** each **BENEFICIARY** of such trust, and all **ATTORNEYS and REAL ESTATE BROKERS**, and all **AGENTS** who have acted on behalf of any of the foregoing with respect to the application:

(NOTE: All relationships to the application listed above in **BOLD** print must be disclosed. Multiple relationships may be listed together, e.g., **Attorney/Agent, Contract Purchaser/Lessee, Applicant/Title Owner**, etc. For a multiparcel application, list the Tax Map Number(s) of the parcel(s) for each owner(s) in the Relationship column.)

NAME (enter first name, middle initial, and last name)	ADDRESS (enter number, street, city, state, and zip code)	RELATIONSHIP(S) (enter applicable relationships listed in BOLD above)
KARINA I. SUAZNABAR d/b/a MELODY DAYCARE, INC.	6346 HILLCREST PL. Alexandria, VA 22312	Applicant
MARIA SUAZNABAR	525 N. Armistead ST #303 Alexandria, VA 22312	Title Owner

(check if applicable) There are more relationships to be listed and Par. 1(a) is continued on a "Special Permit/Variance Attachment to Par. 1(a)" form.

* In the case of a condominium, the title owner, contract purchaser, or lessee of 10% or more of the units in the condominium.
** List as follows: Name of trustee, Trustee for (name of trust, if applicable), for the benefit of: (state name of each beneficiary).

CAB
124457

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

SPECIAL PERMIT/VARIANCE AFFIDAVIT

DATE: April 27, 2014
(enter date affidavit is notarized)

124457

1(b). The following constitutes a listing*** of the **SHAREHOLDERS** of all corporations disclosed in this affidavit who own 10% or more of any class of stock issued by said corporation, and where such corporation has 10 or less shareholders, a listing of all of the shareholders:

(NOTE: Include SOLE PROPRIETORSHIPS, LIMITED LIABILITY COMPANIES, and REAL ESTATE INVESTMENT TRUSTS herein.)

CORPORATION INFORMATION

NAME & ADDRESS OF CORPORATION: (enter complete name, number, street, city, state, and zip code)

MELODY DAY CARE, INC
6346 Hillcrest Place
Alexandria, VA 22312

DESCRIPTION OF CORPORATION: (check one statement)

- There are 10 or less shareholders, and all of the shareholders are listed below.
- There are more than 10 shareholders, and all of the shareholders owning 10% or more of any class of stock issued by said corporation are listed below.
- There are more than 10 shareholders, but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.

NAMES OF SHAREHOLDERS: (enter first name, middle initial, and last name)

KARINA I. SUAZNABAR

(check if applicable) There is more corporation information and Par. 1(b) is continued on a "Special Permit/Variance Attachment 1(b)" form.

*** All listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be broken down successively until (a) only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders has no shareholder owning 10% or more of any class of stock. *In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE* of the land that is a partnership, corporation, or trust, such successive breakdown must include a listing and further breakdown of all of its partners, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown must also include breakdowns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER or LESSEE* of the land. Limited liability companies and real estate investment trusts and their equivalents are treated as corporations, with members being deemed the equivalent of shareholders; managing members shall also be listed.* Use footnote numbers to designate partnerships or corporations, which have further listings on an attachment page, and reference the same footnote numbers on the attachment page.

124457

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

SPECIAL PERMIT/VARIANCE AFFIDAVIT

DATE: April 27, 2014
(enter date affidavit is notarized)

124457

1(c). The following constitutes a listing*** of all of the PARTNERS, both GENERAL and LIMITED, in any partnership disclosed in this affidavit:

PARTNERSHIP INFORMATION

PARTNERSHIP NAME & ADDRESS: (enter complete name, number, street, city, state, and zip code)

(check if applicable) The above-listed partnership has no limited partners.

NAMES AND TITLE OF THE PARTNERS (enter first name; middle initial, last name, and title, e.g. General Partner, Limited Partner, or General and Limited Partner)

N/A

(check if applicable) There is more partnership information and Par. 1(c) is continued on a "Special Permit/Variance Attachment to Par. 1(c)" form.

*** All listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be broken down successively until: (a) only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders has no shareholder owning 10% or more of any class of stock. *In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE* of the land that is a partnership, corporation, or trust, such successive breakdown must include a listing and further breakdown of all of its partners, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown must also include breakdowns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE* of the land. Limited liability companies and real estate investment trusts and their equivalents are treated as corporations, with members being deemed the equivalent of shareholders; managing members shall also be listed.* Use footnote numbers to designate partnerships or corporations, which have further listings on an attachment page, and reference the same footnote numbers on the attachment page.

124457

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

Page Four

SPECIAL PERMIT/VARIANCE AFFIDAVIT

DATE: April 27, 2014
(enter date affidavit is notarized).

124457

1(d). One of the following boxes **must** be checked:

In addition to the names listed in Paragraphs 1(a), 1(b), and 1(c) above, the following is a listing of any and all other individuals who own in the aggregate (directly and as a shareholder, partner, and beneficiary of a trust) 10% or more of the **APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE*** of the land:

Other than the names listed in Paragraphs 1(a), 1(b), and 1(c) above, no individual owns in the aggregate (directly and as a shareholder, partner, and beneficiary of a trust) 10% or more of the **APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE*** of the land.

2. That no member of the Fairfax County Board of Zoning Appeals, Planning Commission, or any member of his or her immediate household owns or has any financial interest in the subject land either individually, by ownership of stock in a corporation owning such land, or through an interest in a partnership owning such land.

EXCEPT AS FOLLOWS: (NOTE: If answer is none, enter "NONE" on the line below.)

NONE

(check if applicable) There are more interests to be listed and Par. 2 is continued on a "Special Permit/Variance Attachment to Par. 2" form.

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

SPECIAL PERMIT/VARIANCE AFFIDAVIT

DATE: April 27, 2014
(enter date affidavit is notarized)

124457

3. That within the twelve-month period prior to the public hearing of this application, no member of the Fairfax County Board of Zoning Appeals, Planning Commission, or any member of his or her immediate household, either directly or by way of partnership in which any of them is a partner, employee, agent, or attorney, or through a partner of any of them, or through a corporation in which any of them is an officer, director, employee, agent, or attorney or holds 10% or more of the outstanding bonds or shares of stock of a particular class, has, or has had any business or financial relationship, other than any ordinary depositor or customer relationship with or by a retail establishment, public utility, or bank, including any gift or donation having a value of more than \$100, singularly or in the aggregate, with any of those listed in Par. 1 above.

EXCEPT AS FOLLOWS: (NOTE: If answer is none, enter "NONE" on line below.)

NONE

(NOTE: Business or financial relationships of the type described in this paragraph that arise after the filing of this application and before each public hearing must be disclosed prior to the public hearings. See Par. 4 below.)

(check if applicable) [] There are more disclosures to be listed and Par. 3 is continued on a "Special Permit/Variance Attachment to Par. 3" form.

4. That the information contained in this affidavit is complete, that all partnerships, corporations, and trusts owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE* of the land have been listed and broken down, and that prior to each and every public hearing on this matter, I will reexamine this affidavit and provide any changed or supplemental information, including business or financial relationships of the type described in Paragraph 3 above, that arise on or after the date of this application.

WITNESS the following signature:

(check one)

KARINA I. SUAZNABAR

Applicant

Applicant's Authorized Agent

KARINA I. SUAZNABAR Applicant

(type or print first name, middle initial, last name, and title of signee)

Subscribed and sworn to before me this 28th day of April, 2014, in the State/Comm. of Virginia, County/City of Fairfax.

Notary Public

My commission expires: 07-31-17



CAB
124457

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

Page _____ of _____

Special Permit/Variance Attachment to Par. 1(a)

DATE: April 27, 2014
(enter date affidavit is notarized)

124457

(NOTE: All relationships to the application are to be disclosed. Multiple relationships may be listed together, e.g., **Attorney/Agent, Contract Purchaser/Lessee, Applicant/Title Owner**, etc. For a multiparcel application, list the Tax Map Number(s) of the parcel (s) for each owner(s) in the Relationship column.)

NAME	ADDRESS	RELATIONSHIP(S)
(enter first name, middle initial, and last name)	(enter number, street, city, state, and zip code)	(enter applicable relationships listed in BOLD above)

(check if applicable)

There are more relationships to be listed and Par. 1(a) is continued further on a "Special Permit/Variance Attachment to Par. 1(a)" form.

124457

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

Page _____ of _____

Special Permit/Variance Attachment to Par. 1(b)

DATE: April 27, 2011
(enter date affidavit is notarized)

124457

NAME & ADDRESS OF CORPORATION: (enter complete name, number, street, city, state, and zip code)

Melody Day Care, Inc
6346 Hillcrest Pl.
Alexandria, VA 22312

DESCRIPTION OF CORPORATION: (check one statement)

- There are 10 or less shareholders, and all of the shareholders are listed below.
 There are more than 10 shareholders, and all of the shareholders owning 10% or more of any class of stock issued by said corporation are listed below.
 There are more than 10 shareholders, but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.

NAMES OF THE SHAREHOLDERS: (enter first name, middle initial, and last name)

Karina I. Suaznabar

NAME & ADDRESS OF CORPORATION: (enter complete name, number, street, city, state, and zip code)

Melody Day Care, Inc
6346 Hillcrest Pl.
Alexandria, VA 22312

DESCRIPTION OF CORPORATION: (check one statement)

- There are 10 or less shareholders, and all of the shareholders are listed below.
 There are more than 10 shareholders, and all of the shareholders owning 10% or more of any class of stock issued by said corporation are listed below.
 There are more than 10 shareholders, but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.

NAMES OF THE SHAREHOLDERS: (enter first name, middle initial, and last name)

Karina I. Suaznabar

(check if applicable) There is more corporation information and Par. 1(b) is continued further on a "Special Permit/Variance Attachment to Par. 1(b)" form.

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

Page _____ of _____

Special Permit/Variance Attachment to Par. 1(c)

DATE: April 27, 2014
(enter date affidavit is notarized)

124457

PARTNERSHIP NAME & ADDRESS: (enter complete name, number, street, city, state, zip code)

N/A

(check if applicable) The above-listed partnership has no limited partners.

NAMES AND TITLES OF THE PARTNERS: (enter first name, middle initial, last name, and title, e.g., General Partner, Limited Partner, or General and Limited Partner)

N/A

(check if applicable) There is more partnership information and Par. 1(c) is continued further on a "Special Permit/Variance Attachment to Par. 1(c)" form.

124457

Application No.(s): _____
(county-assigned application number(s), to be entered by County Staff)

Page _____ of _____

Special Permit/Variance Attachment to Par. 2

DATE: April 27/2011
(enter date affidavit is notarized)

124457

(check if applicable)

There are more financial interests in the subject land to be listed and Par. 2 is continued further on a "Special Permit/Variance Attachment to Par. 2" form.

124457

STATEMENT OF JUSTIFICATION
FOR A HOME CHILD CARE FACILITY

Karina I. Suaznabar
6346 Hillcrest Pl.
Alexandria, VA 22312
(703)474-6467
ive142003@yahoo.com

RECEIVED
Department of Planning & Zoning

FEB 19 2014

Zoning Evaluation Division

February 8, 2014
Fairfax County Department of planning & Zoning
Zoning Evaluation Division
12055 government Center Parkway, Suite 801
Fairfax, VA 22035

Re: Special Permit Application
Applicant: Karina I. Suaznabar
Zoning Ordinance Section 8-305 Home child Care Facility and
Section 8-004 of General Standards
Tax Map #:0721-07-0065
Zoning District: R-3
Lot Size: 10,500 SQFT

To whom it may concern,

Please accept the following as my statement of justification for a special permit for a home child care facility in my residence. I live in a single-family detached dwelling at 6346 Hillcrest Pl. in Alexandria, Virginia 22312 with my husband and 3 children. The property is zoned R-3 and I understand I need to seek approval of a special permit in order to operate a child care facility within my home. I am currently licensed by the state of Virginia to have 12 children in my childcare facility in my home. Below is information about my childcare facilities operations:

Hours of Operation: The child care is open from 7:00 AM to 6:00PM, Monday through Friday.

Number of Children: I care for up to 12 children at any one time. This number does not include my own children.

Ages of Own Provider Children: 19, 15 and 8 years old.

Employees: I have two assistants who work in a full time basis from 7:00AM to 6:00PM, Monday through Friday.

Arrival Schedule: Three of the children arrive between 7:00 and 7:45 AM. Six of the children arrive between 7:45 and 9:00 AM. Three children arrive between 9:00 and 10:00 AM.

Departure Schedule: Two children are picked up between 2:30 PM and 3:30 PM. Five of children leave between 4:00 PM and 5:00 PM. Five of children leave between 5:00 PM to 6:00 PM.

Area Served: Currently some of the children live in the general vicinity of my neighborhoods. Others live in the Franconia, Arlington and Vienna neighborhoods. These parents drive their children to my house.

Operations: As I stated, my house is a single-family detached dwelling. It has a walkout basement, which is where the children spend most of their time. I use the whole basement area for meals, snacks, learning activities, napping and play activities. Attached is a floor plan that indicates the areas where the day care is located. The house has a total of 4,262.00 square feet. The basement area, kitchen, bathroom, nursery room, activity room, play area where I conduct the day care consist of approximately 1,131.00 square feet in total. (See attachment 2 for floor layout and interior photos)

Hazardous or Toxic Substances: The entire house and yard are free from hazardous or toxic substances. No hazardous materials will be generated, utilized, stored, treated, and/or disposed of onsite.

Zoning Ordinance Compliance: The proposed development conforms to the provisions of all applicable ordinances, regulations and adopted standards or, if any waiver, exception or variance is sought, such request has been specifically noted with the justification for such modification.

Outdoor Play Area: I use my backyard for outdoor play for children. The area is approximately 3,850.00 square feet. There is one set of swing and slide, two slide sets for ages two and up, one slide set for ages 1 year old. It also has two playhouses, two activities tables, one basketball set, one climb on truck set, five ride on toys, one sand box and fence on my most recent house location plat which is included.

Parking: I use my driveway to park my family cars. My driveway provides enough parking for 6 cars because the driveway is a "U" shape driveway, has more that 75 feet long, and can hold two cars side by side on one of the left side of my driveway. In Addition, ample parking is available along the streets in front of my house for the parents and employees.

For all these reasons, I believe that my proposed home daycare facility will not impact my neighbors in any negative way.

In conclusion, I am proposing no changes to the outside appearance of my brick and vinyl

sided home. I propose no addition and no signs regarding the daycare. Adequate parking is available for my parents, employees and my family. For these reasons, I believe that my proposed home day care facility will not impact my neighbors in any negative way.

Sincerely,

Karina I. Suaznabar
Owner of Karina's Home Child Care

STATEMENT OF JUSTIFICATION
FOR A HOME CHILD CARE FACILITY

RECEIVED
Department of Planning & Zoning
FEB 19 2014
Zoning Evaluation Division

Name: KARINA I. SUAZNABAR
Address: 6346 HILLCREST PL.
Alexandria, VA 22312
Phone #: 703-474-6467
E-mail: ive142003@yahoo.com

Date 02/14/14

Fairfax County Department of Planning & Zoning
Zoning Evaluation Division
12055 Government Center Parkway, Suite 801
Fairfax, VA 22035

Re: Special Permit Application
Applicant: KARINA I. SUAZNABAR
Zoning Ordinance Section 8-305 for Home Child Care Facility
Section 8-004 of General Standards

Tax Map #: 0721 07 0065
Zoning District: R-3
Lot Size: 10,500 SQFT

To whom it may concern,

Please accept the following as my statement of justification for a special permit for a home child care facility in my home. I own and live in a attached (detached) (circle one) dwelling at 6346 HILLCREST PL., Alexandria, VA 22312 (your address).

The property is zoned R-3 and I understand I need to seek approval of a special permit in order to operate a child care facility within my home. I am currently licensed by the State of Virginia to have 12 children in my child care facility in my home. Below is information about my child care facility's operations:

Hours. The child care is open from 7:00am to 6:00 p.m

Number of Children. I care for up to 12 children at any one time. This number does not include my own 2 child/children.

Employees. I have 0 assistant(s) who work part-time and 2 assistant(s) who work full-time.

Arrival Schedule. 2 of the children arrive between 7:00 AM and 9:30 AM.

Departure Schedule. 3 of the children are picked up at 3:30 PM. <1 children between 4:00 to 5:00 ; and 5 children between 5:15 to 6:00 p.m

Area Served. 2 children live in the general vicinity; 3 in Franconia ; 2 in Arlington; 2 in Vienna (what neighborhood/general area do the children live in?) ; 1 in Aunduddle

Operations. As I stated, my house is a single-family attached (detached) (circle one) dwelling. It has (explain the general layout of the house):

3 levels; 1st basement that has 4 rooms 1 bath; 1st level that has 4 rooms 2 bath / kitchen 1 dining 1 living room; 2nd level has 3 bedrooms 2 bath

The house has 4,262.0 square feet. The following rooms are where I conduct the day care:

The entire basement is used for the daycare

These rooms are 1,131 square feet total.

Hazardous or Toxic Substances. The house and yard are free from hazardous or toxic substances. No hazardous materials will be generated, utilized, stored, treated, and/or disposed of onsite.

Zoning Ordinance Compliance. The proposed development conforms to the provisions of all applicable ordinances, regulations and adopted standards or, if any waiver, exception or variance is sought, such request has been specifically noted with the justification for such modification.

Outdoor Play Area. I use my back yard for outdoor play for the children. The area is approximately 3,850 square feet. The outdoor play area consists of: 1 swing set w/ slide; 2 slide sets for toddlers ages 2 and up; 1 slide set ages 2 under; 2 play houses; 2 activitie tables; 5 ride on toys; 1 basketball set ages 2 and up

Parking. I use my driveway to park my family car(s). My parents park in my

drive way. My driveway has a "U" shape with enough space to park my 2 cars and 5 more cars at 1 time.

In addition; ample parking is available along the streets of my house.

For these reasons, I believe that my proposed home day care facility will not impact my neighbors in any negative way.

In conclusion, I am proposing no changes to the outside appearance of my brick and vinyl sided home. I propose no addition and no signs regarding the daycare. Adequate parking is available for my parents, employees and my family. For these reasons, I believe that my proposed home day care facility will not impact my neighbors in any negative way.

Sincerely,

Karina I. Swaznabat

Owner of Daycare

RECEIVED
 Department of Planning & Zoning
 FEB 19 2014
 Zoning Evaluation Division

Arrival Schedule and Departure Schedule

Arrival Schedule

Child	7:00 - 7:45 AM	7:45 - 8:00 AM	8:00 - 8:30 AM	9:00 - 9:15 AM
1	X			
2	X			
3	X			
4		X		
5		X		
6		X		
7			X	
8			X	
9			X	
10				X
11				X
12				X

Departure Schedule

Child	2:45 - 4:15 PM	4:15 - 4:30 PM	4:30 - 5:00 PM	5:00 - 5:30 PM
1	X	X		
2	X	X		
3		X		
4			X	
5			X	
6			X	
7				X
8				X
9				X
10				X
11			X	
12				X

Owner Consent for
Home Child Care Facility

RECEIVED
Department of Planning & Zoning

FEB 19 2014

Zoning Evaluation Division

Name: _____

Address: 6346 HILLCREST PL.

Alexandria, VA 22312

Phone #: 703-343-0166

E-mail address: ive142003@yahoo.com

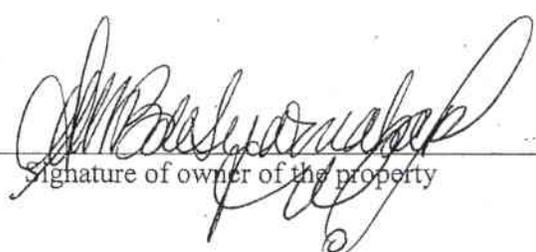
Tax Map #: 0721070065

Ownership of the above-referenced property is MARIA A. SUAZNABAR.

This property is the subject of a Special Permit Application submitted by KARINA I. SUAZNABAR, a renter of the property, to Fairfax County for approval of a home child care facility.

This is evidence that the owner, MARIA A. SUAZNABAR, is giving consent that KARINA I. SUAZNABAR may apply for the Special Permit Application for a home child care facility to operate on this property.

By: _____


Signature of owner of the property

MAP REFERENCE SHEET NO. 72-1 PROPERTY IDENTIFICATION NO. C-1137

FORM ZA

Sever

COUNTY OF FAIRFAX, VIRGINIA
OFFICE OF THE ZONING ADMINISTRATOR

APPLICATION FOR CERTIFICATE OF OCCUPANCY

FOR USE IN CONNECTION WITH A NEW BUILDING OR FOR CHANGE IN THE
EXTERIOR OUTLINE OF AN EXISTING BUILDING

(WRITE WITH INK)

Date 3-31-64

Name of Proposed Occupant or Trade Name

Applicant West Hampton Const. Co. Inc.

Premises number 2024 N Kirkwood Rd. Arlton

Lot number 65 Block _____ Section 1

Subdivision or

Acreage Description Lunenburg Heights

To be used as one family dwelling

Last used as new

Non Conforming Use _____

Material of Building _____

No. of stories high _____

Which floor do you propose to use? _____

Owner of Building (or agent) _____

Address _____

TO BE FILLED IN BY CLERK	
ZONE	<u>R-12.5</u>
HEIGHT	_____
FIRE ZONE	_____
BUILDING PERMIT NO.	<u>P-20485</u>
DATE	<u>3-31-64</u>
INITIALS	
<u>Hillcrest Road</u>	

This Application Constitutes A Written Request For a Certificate of Occupancy Upon Compliance By the Applicant With Provisions of Section 30-20 (d) of the Code.

It is understood that the Certificate of Occupancy does not take the place of any license that may be required by law, and also that it does not confer the right to erect or maintain any kind of signs.

Zoning Section
No. <u>D-13999</u>
Issued <u>PC</u>
Date <u>5-10-65</u>

Signature of Proposed Occupant

Applicant Franklin M. McLeod

Address 505 Haywood Road

Franklin M. McLeod

Telephone number JE 3-2137

112,210-40-20

COUNTY OF FAIRFAX, VIRGINIA

OFFICE OF THE BUILDING INSPECTOR

Application for Building Permit

MAP REFERENCE			
PLAT NUMBER	BLK. OR SEC.	BLK. OR SEC.	PARCE. OR LOT
72 A	9		65

CENSUS TRACT NO.	
DATE	19 <u>64</u>
PERMIT NO.	<u>P2086</u>

To: BUILD Alter or Repair Add to Demolish Move

JOB LOCATION	C1139 DIRECTIONS		DESCRIPTION	
	Route		For: Residential <input checked="" type="checkbox"/>	Institutional <input type="checkbox"/>
OWNER	Street	HILLCREST DRIVE	Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>
	Lot No.	65	No. of Bldgs.	1 Type <u>dwelling</u>
ARCHITECT ENGINEER	Subdivision	LINCOLN HEIGHTS	No. of Units	
	Name	WEST HAMPTON CONST. CO. INC.	No. of Kitchens	1 No. of Stories <u>1 1/2</u>
CONTRACTOR	Address	2024 N. KIRKWOOD RD.	No. of Baths	2 Ht. of Building <u> </u> Ft.
	City	ARLINGTON, VA	No. of Rooms	7 Total Area <u> </u>
AUTHORIZATION	Name	GOLDEN KEY HOMES INC.	Basement <input checked="" type="checkbox"/>	Slab <input type="checkbox"/> Crawl <input type="checkbox"/> FILL <input type="checkbox"/> SOIL <input type="checkbox"/>
	Address		Footing Size	8" x 16" Depth from Finish Grade <u> </u> Ft.
PLAN APPROVAL	City	ARLINGTON, VA	Material of Exterior Walls	BRICK & FRAME
	Name	WEST HAMPTON CONST. CO. INC.	Basement	
ZONING	Address		1st Floor	
	City	ARLINGTON, VA	2nd Floor	
ZONING	Name	WEST HAMPTON CONST. CO. INC.	Material of Interior Walls	
	Address	2024 N. KIRKWOOD RD.	HEAT: Gas <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Hot Air <input checked="" type="checkbox"/> Hot Water <input type="checkbox"/>	
ZONING	City	ARLINGTON, VA	Boiler <input type="checkbox"/> Air Conditioner <input type="checkbox"/> Sprinkler <input type="checkbox"/>	
	Name	WEST HAMPTON CONST. CO. INC.	ROOF: Flat <input type="checkbox"/> Pitch <input checked="" type="checkbox"/> Shed <input type="checkbox"/>	
ZONING	Address	2024 N. KIRKWOOD RD.	SEWAGE: Public <input type="checkbox"/> Community <input type="checkbox"/> Septic Tank <input type="checkbox"/> Pit Privy <input type="checkbox"/> None <input type="checkbox"/>	
	City	ARLINGTON, VA	WATER: Public <input type="checkbox"/> Individual Well <input type="checkbox"/> None <input type="checkbox"/>	

I hereby certify that I have the authority to make this application, that the information given is correct, and that the use and construction shall conform to the County Health Regulations, the Building and Zoning Ordinances, and private deed restrictions, if any, which are imposed on the property.

JE 3-7139 Phone No. Date March 31, 1964 Signature of Owner or Auth. Agent Charles W. Wood

Use Group of Building L-3 Area of Bldg. 3360 @ 007 per Sq. Ft. \$ 24.00

Type of Construction 4-B Area of Bldg. @ per Sq. Ft. \$

Fire District Total Each Bldg. \$

Date Checked 4-1-1964 By ESM TOTAL FEE \$ 24.00

Approved by Building Inspector Charles W. Wood

ROUTING	OFFICE	Rm. No.	DATE	APPROVAL	REMARKS
<input checked="" type="checkbox"/>	Land Office	112	3-21-64	mt	
<input checked="" type="checkbox"/>	Zoning Administrator	210	3-31-64	W	
<input checked="" type="checkbox"/>	Health Officer	Rt. 237			Health and Welfare Bldg. on Rt. 237
<input checked="" type="checkbox"/>	Sanitary Engineer	Bsmt	3-31-64	JRC	
<input checked="" type="checkbox"/>	Finance Office	120			
<input checked="" type="checkbox"/>	Building Inspector	203			Return to secure Bldg. Permit

Supervisor of Assessments

Property is listed in name of Howard J. Young

Magisterial District Manassas 1 Deed Book Reference 5370-473

Authorization: John W. Ferguson, Jr.

Subdivision Lincoln Heights Lot No 65 Block Section 1 Zone R-12.5

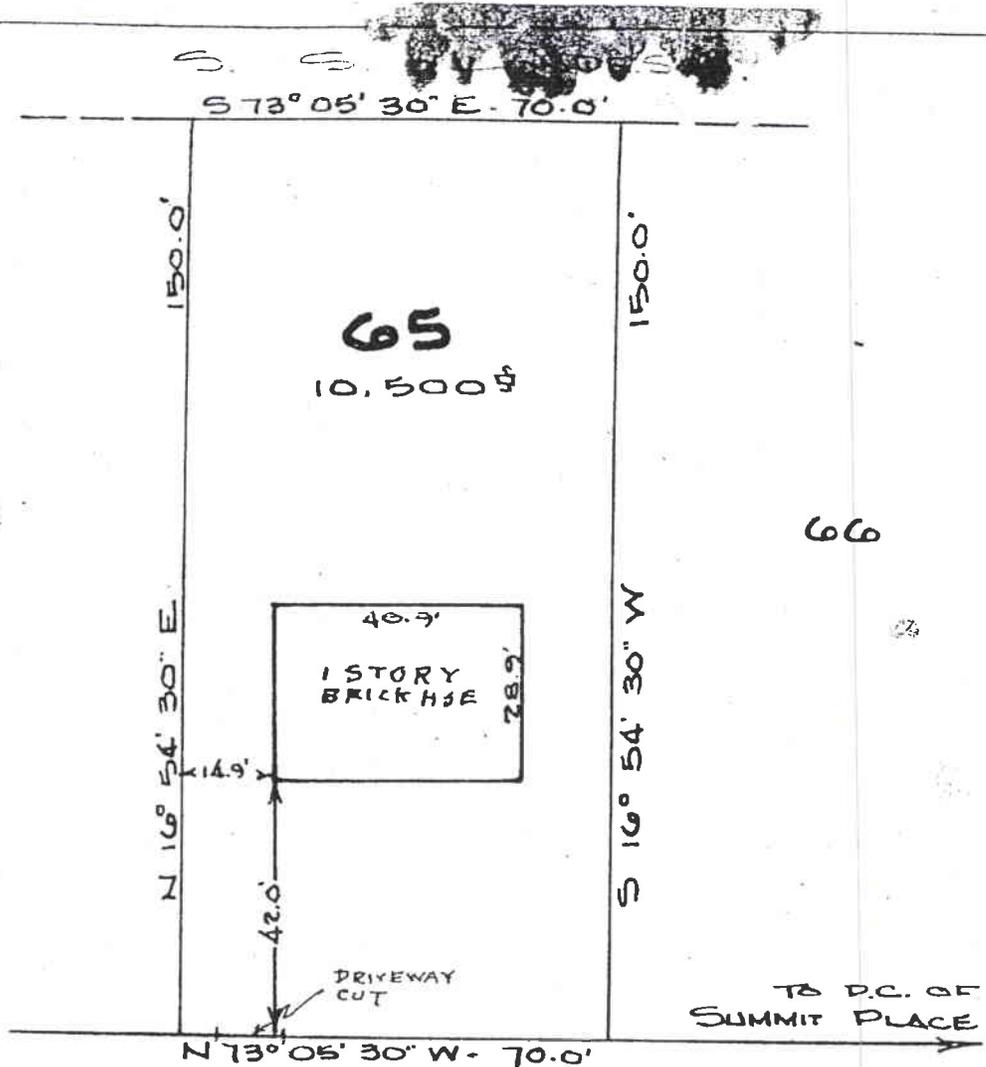
No. Acres or Sq. Ft.

Street Address

LOT SIZE: Front Right Side Left Side Rear

Use of Bldg dwelling Use after Alteration No. Families one

Set Back: Front 40 Rt. Side 12 Left Side 12 Rear 25 f Authorization



HILLCREST ROAD
(60.0' WIDE)

HOUSE LOCATION PLAT
 LOT 65, SECTION 1
LINCOLNIA HEIGHTS
FAIRFAX COUNTY, VIRGINIA

SCALE: 1" = 30'

AUG. 8, 1964

FRANK A. CARPENTER
 CERTIFIED LAND SURVEYOR
Frank A. Carpenter
 CERTIFIED CORRECT:



Inspect OK 6/25/73 K 9218

MAP REFERENCE			
Plot Number	Subd. Div.	Blk. or Sec.	Parcel or lot
114	7		

COUNTY OF FAIRFAX, VIRGINIA
OFFICE OF THE BUILDING INSPECTOR
Application for Building Permit
and Certificate of Occupancy

APPLICATION NO.	199276
DATE	6-21-73
PERMIT NO.	

To: BUILD ALTER OR REPAIR ADD TO DEMOLISH MOVE

JOB LOCATION	Street: <u>6346 HULLCROFT DRIVE</u>	DESCRIPTION	For: <u>POOL (16' x 32')</u>
	Lot No. <u>65</u>		
OWNER	Subdivision: <u>Greenwood</u>	No. of Bldgs. _____ Est. Const. Cost \$ <u>5,000.00</u> No. of Units _____ No. of Stories _____ No. of Kitchens _____ Penthouse _____ No. of Baths _____ Ht. of Bldg. _____ ft. No. of Rooms _____ Bldg. Area _____ sq. ft. (Exclude Kit. & Bath) Basement <input type="checkbox"/> Slab <input type="checkbox"/> Crawl <input type="checkbox"/> Soil: Solid <input type="checkbox"/> Fill <input type="checkbox"/>	
	Corp. Name _____		
	Name: <u>DR. WMS. H.H. POLA</u>		
ARCHITECT ENGINEER	Address: <u>SPRING</u>	Ftg. Concrete <input type="checkbox"/> Pile <input type="checkbox"/> Column <input type="checkbox"/> Ext. Walls: Wood <input type="checkbox"/> Metal <input type="checkbox"/> Brick <input type="checkbox"/> Int. Walls: Plaster <input type="checkbox"/> Drywall <input type="checkbox"/> Panel <input type="checkbox"/> Roof: Flat <input type="checkbox"/> Pitch <input type="checkbox"/> Shed <input type="checkbox"/> Roofing: Built-up <input type="checkbox"/> Shingle <input type="checkbox"/> Roll <input type="checkbox"/> Heat: Oil <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Equipment: Boiler <input type="checkbox"/> Furnace <input type="checkbox"/> Heat Pump <input type="checkbox"/> Air Cond. <input type="checkbox"/> Sewage: Public <input type="checkbox"/> Community <input type="checkbox"/> Septic Tank <input type="checkbox"/> None <input type="checkbox"/> Water: Public <input type="checkbox"/> Individual Well <input type="checkbox"/> None <input type="checkbox"/> Remarks: <u>NO SEWER GENERATOR</u>	
	City: <u>ALEXANDRIA</u>		
	Telephone Number: <u>941-2858</u>		
CONTRACTOR	Name: <u>STANLEY WOOD</u>	NO SEWER TAP INVOLVED	
	Address: <u>11335 Lee Highway</u>		
	City: <u>FAIRFAX, VIRGINIA</u>		

I hereby certify that I have the authority to make this application, that the information given is correct, and that the use and construction shall conform to the County Health Regulations, the Building and Zoning Ordinances, and private deed restrictions, if any, which are imposed on the property.

Phone No. 591-5550 Date 6/21/73 Signature of Owner or Auth. Agent J. Richard Brindley

APPLICANT: DO NOT WRITE BELOW THIS LINE

PLAN APPROVAL	Use Group of Building: <u>117</u> Area of Bldg. _____ per Sq. Ft. \$ _____
	Type of Construction _____ \$ _____
	Fire District _____ \$ _____
	Date Checked: <u>6-21-73</u> By: <u>[Signature]</u> TOTAL FEE \$ <u>10.00</u>

ROUTING	OFFICE	FLOOR	DATE	APPROVED BY	OFFICE	FLOOR	DATE	APPROVED BY
	<input checked="" type="checkbox"/>	Land Office	4th	6-21-73	[Signature]	Fire Marshal	8 Level	
<input checked="" type="checkbox"/>	Zoning Administrator	6th	6-21-73	[Signature]	Design Review	7th	6-21-73	[Signature]
<input checked="" type="checkbox"/>	Sanitation	8th	6-21-73	[Signature]	Housing & License	8th	6-21-73	[Signature]
<input checked="" type="checkbox"/>	Health Dept.	Annex	6-21-73	[Signature]				

I hereby certify to the following statement:

- All materials used for work performed under this permit will be paid directly to the supplier by the property owner.
- All compensation will be on an hourly basis and paid by the property owner directly to the person(s) performing work under this permit.

Date _____ 19 _____ By _____
Property Owner _____ Authorized Agent _____

Supervisor of Assessments
Property is listed in name of Polina Lanning & J. H. A.
Magisterial District 11413 Deed Book Reference 2916-322
Supervisor: [Signature]

Subdivision _____ Lot No. 65 Block _____ Section _____ Zone KFI

Street Address _____

Use of Bldg. _____ Use after Alteration _____ No. Families _____

BZA _____ SITE PLAN [Signature]

Set Back: Front _____ Rt. Side _____ Left Side _____ Rear _____ Zoning Administrator [Signature]

MASON - 72-1 (7) 67

6346 Hillcrest place

P-99276
pool

inspection
of
6-25-73
M/C

LANDESS

[Handwritten signature]

Scale & Match As Seen as
Laid

The proposed area will be
returned to you in 45 days.

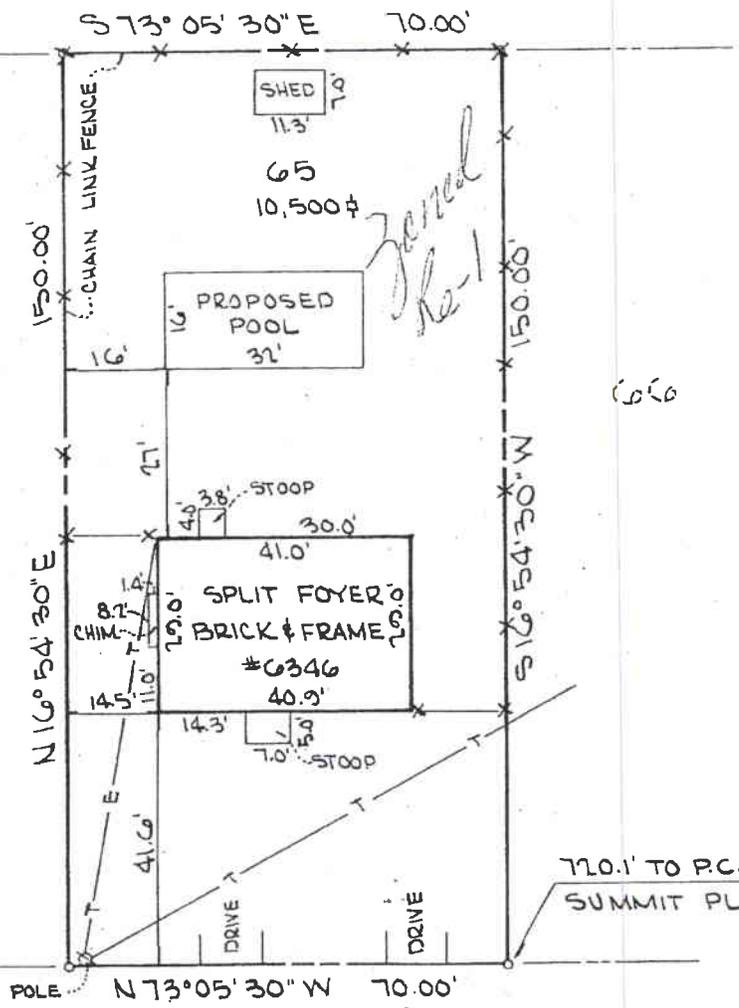
Department of County Development
Fairfax County, Virginia
Application Number _____

I hereby certify that this plot plan
and structure shown hereon conform
to the requirements of Section 113.10
of The Fairfax County, Virginia
Building Code.

Director of County Development

By His Agent

6-8-73
Date



HILLCREST ROAD
60' WIDE

PROPOSED POOL LOCATION
LOT 65, SECTION ONE

LINCOLNIA HEIGHTS

FAIRFAX COUNTY VIRGINIA
SCALE: 1" = 30'

Approved for proposed
location of building as
shown. Final approval
subject to wall check.

Date JUN 18 1973

[Handwritten signature]
Zoning Administrator



RICHARD H. BARTLETT & ASSOCIATES
ENGINEERING, SURVEYING & LAND PLANNING
FAIRFAX, VIRGINIA 273-6632

NO TITLE REPORT FURNISHED.

BUILDING PERMIT APPLICATION

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 FAIRFAX COUNTY, VIRGINIA
 PERMIT APPLICATION CENTER
 12055 Government Center Parkway, 2nd Floor
 Fairfax, Virginia 22035-5504
 (703) 222-0801

PERMIT # 98202 B0360
 FOR INSPECTIONS CALL: (703) 222-0455

FILL IN ALL APPROPRIATE INFORMATION IN THIS COLUMN
 (PLEASE PRINT OR TYPE)

JOB LOCATION:
 ADDRESS 6346 HILLCREST PL
 LOT # 45 BUILDING _____
 FLOOR _____ SUITE _____
 SUBDIVISION LINCOLN HEIGHTS
 TENANT'S NAME _____

OWNER INFORMATION: OWNER TENANT
 NAME THOMAS DAN DENNIS
 ADDRESS 6346 Hillcrest Pl
 CITY ALFA STATE VA ZIP _____
 TELEPHONE (703) 441-1179

CONTRACTOR INFORMATION:
 CHECK IF SAME AS OWNER
 COMPANY NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 TELEPHONE _____
 LOCAL CONTRACTOR LICENSE # _____
 STATE CONTRACTORS LICENSE # _____
 COUNTY BUSINESS ACCOUNT # _____
 APPLICANT THOMAS DENNIS

DESCRIPTION OF WORK
7' D x 41' W FRONT PORCH
OPEN 12' HIGH

HOUSE TYPE _____
 ESTIMATED COST OF CONSTRUCTION 2000
 BLDG AREA (SQ FT OF FOOTPRINT) 134
 USE GROUP OF BUILDING 503
 TYPE OF CONSTRUCTION _____
 SEWER SERVICE: PUBLIC SEPTIC OTHER
 WATER SERVICE: PUBLIC WELL OTHER
 OTHER PLEASE SPECIFY _____

DESIGNATED MECHANICS' LIEN AGENT:
 (Residential Construction Only)
 NAME: _____
 ADDRESS: _____
 NONE DESIGNATED: PHONE: _____

CHARACTERISTICS FOR NEW SFD, TH, APT & CONDOS:

# KITCHENS _____	EXTER. WALLS _____
# BATHS _____	INTER. WALLS _____
# HALF BATHS _____	ROOF MATERIAL _____
# BEDROOMS _____	FLOOR MATERIAL _____
# OF ROOMS _____	FIN. BASEMENT _____ %
# STORIES _____	HEATING FUEL _____
BUILDING HEIGHT <u>11/2</u>	HEATING SYSTEM _____
BUILDING AREA _____	# FIREPLACES _____
BASEMENT _____	

DO NOT WRITE IN THIS SPACE - COUNTY USE ONLY

P. AN # 1096-05616
 TAXMAP # 0721-07-0065
 ROUTING DATE APPROVED BY:
 ZONING 7-21-98 WJF
 SITE PERMITS 7-23-98 VH
 SANITATION _____
 HEALTH DEPT. _____
 FIRE MARSHAL _____
 BUILDING REVIEW 7-23-98 GWK
 LICENSING _____
 ASBESTOS _____

FEE \$ _____
 FILING FEE \$ 57
 AMOUNT DUE \$ 50.00

BUILDING PLAN REVIEW:
 REVIEWER _____ # OF HOURS _____
 REVISION FEES \$ _____
 FIRE MARSHAL FEES \$ _____
 FIXTURE UNITS _____ PLAN LOC. I R

APPROVED FOR ISSUANCE OF BUILDING PERMIT
 BY [Signature] DATE 7/23/98

ZONING REVIEW: SF DT ZONING CLASS R3
 USE _____
 ZONING CASE # _____
 GROSS FLOOR AREA OF TENANT SPACE _____

YARDS: FRONT 34.6 GARAGE: 1 2 3
 FRONT _____ OPTIONS: YES NO
 L SIDE 14' REMARKS: 6' x 4' Front Porch
 R SIDE 14' 7 X 41 -
 REAR (N)

GRADING AND DRAINAGE REVIEW
 SOILS: # 15 A B C
 HISTORICAL DISTRICT _____
 AREA TO BE DISTURBED (TOTAL SQ FT) 600 sq
 ADD'L IMPERVIOUS AREA (ADDED SQ FT) 245 sq
 PROFFERS _____
 PLAN # _____ APPR. DATE _____

STAMPS:
FF
 (See reverse side of application) over

REMARKS: Soil Test was provided
by state engineer 7/22/98
The hollow & white cones
are attached with soil test
2) Plans attached

Any and all information and/or stamps on the reverse side of this form are a part of this application and must be complied with. I hereby certify that I have authority of the owner to make this application, that the information is complete and correct, and that the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations which relate to the property.

Thomas Dennis 7.19.98 [Signature] 7.19.98
 Signature of Owner or Agent Date Notary Signature Date
 (Notarization required if owner not present at time of application)

Printed Name and Title

MASON - 12-1 (11) 6/

6346 Hillcrest place

P-99276
POOL

inspections
OR
6-25-73
M/C

FOOTINGS AND PIERS MUST BE PLACED ON COMPETENT MATERIAL

Provide Siltation Barrier

DEM
Division of
Inspection Services

Grass & Mulch As Soon as

By

7/23/98
for

to be worked area within

45 days

Department of County Development
Fairfax County, Virginia
Application Number

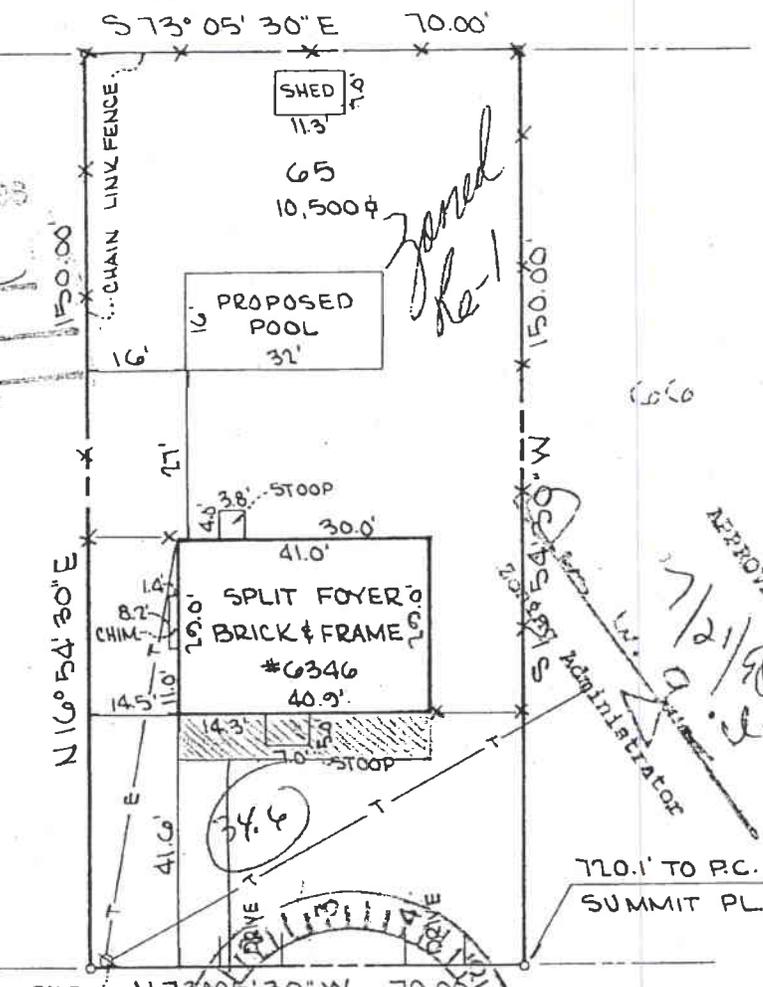
I hereby certify that this plot plan and structure shown hereon conform to the requirements of Section 113.10 of The Fairfax County, Virginia Building Code.

Director of County Development

By His Agent

Date

6-8-73
P



Zoned Re-1

APPROVED
7/21/98
L.W. Adams
Zoning Administrator

HILLCREST ROAD



PROPOSED POOL LOCATION
LOT 65, SECTION ONE

LINCOLNIA HEIGHTS

FAIRFAX COUNTY VIRGINIA
SCALE: 1" = 30'

Approved for proposed location of building as shown. Final approval subject to call check.

Date JUN 18 1973

Zoning Administrator

RICHARD H. BARTLETT & ASSOCIATES
ENGINEERING, SURVEYING & LAND PLANNING
FAIRFAX, VIRGINIA 773-6632

NO TITLE REPORT FURNISHED.

BUILDING PERMIT APPLICATION

FAIRFAX COUNTY OFFICE OF BUILDING CODE SERVICES
 PERMIT APPLICATION CENTER
 12855 Government Center Parkway, 2nd Floor
 Fairfax, Virginia 22035-5504 Telephone: 703-222-0891
 Web site: www.fairfaxcounty.gov/dpwcs

PERMIT # 0423830130

FOR INSPECTIONS CALL 703-222-0455 (see back for more information)

DO NOT WRITE IN GRAY SPACES - COUNTY USE ONLY
 PLAN # 12-001-013012
 TAXMAP # 012-1-107/0065

FILL IN ALL APPROPRIATE INFORMATION IN THIS COLUMN
 (PLEASE PRINT OR TYPE)

JOB LOCATION
 ADDRESS 6246 Hillcrest Place
 LOT # 65 BUILDING _____
 FLOOR _____ SUITE _____
 SUBDIVISION Lincoln Heights
 TENANT'S NAME PHU THI NGUYEN

OWNER INFORMATION OWNER TENANT
 NAME PHU THI NGUYEN
 ADDRESS 6246 Hillcrest Pl.
 CITY Alexandria STATE VA ZIP 22312
 TELEPHONE (703) 941-1879

CONTRACTOR INFORMATION SAME AS OWNER
 CONTRACTORS MUST PROVIDE THE FOLLOWING:
 COMPANY NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 TELEPHONE _____
 STATE CONTRACTORS LICENSE # _____
 COUNTY BPOL # _____

APPLICANT
PHU THI NGUYEN 703-922-8315

DESCRIPTION OF WORK
Addition front porch, kitchen, and family room. Add new kitchen and family room. Remove existing kitchen. Add 2nd floor with 2 bedrooms. House type Single family house.
 ESTIMATED COST OF CONSTRUCTION 155,000.00
 BLDG AREA (SQ FT OF FOOTPRINT) 1647 S.F.
 USE GROUP OF BUILDING RS-2
 TYPE OF CONSTRUCTION V 1.5 00
 SEWER SERVICE PUBLIC SEPTIC OTHER
 WATER SERVICE PUBLIC WELL OTHER
 OTHER PLEASE SPECIFY _____
DESIGNATED MECHANICS' LIEN AGENT
 (Residential Construction Only)
 NAME N/A
 ADDRESS _____
 NONE DESIGNATED PHONE _____

CHARACTERISTICS FOR NEW SFD, TH, APT & CONDOS

# KITCHENS	_____	EXTER. WALLS	_____
# BATHS	_____	INTER. WALLS	_____
# HALF BATHS	_____	ROOF MATERIAL	_____
# BEDROOMS	_____	FLOOR MATERIAL	_____
# OF ROOMS	_____	FIN. BASEMENT	_____ %
# STORIES	_____	HEATING FUEL	_____
BUILDING HEIGHT	_____	HEATING SYSTEM	_____
BUILDING AREA	_____	# FIREPLACES	_____
BASEMENT	_____		

ROUTING	DATE	APPROVED BY
LICENSING		
ZONING	<u>8/25/04</u>	<u>TEV</u>
SITE PERMITS	<u>8/25/04</u>	<u>TEV</u>
HEALTH DEPT.		
BUILDING REVIEW	<u>10-27-04</u>	<u>DMC/nnm</u>
SANITATION		
FIRE MARSHAL		
ASBESTOS		
PROFFERS		

FEE \$ 4122.31
FILING FEE \$ 60
AMOUNT DUE \$ _____

BUILDING PLAN REVIEW
 REVIEWER DMC # OF HOURS _____
 REVISION FEES \$ _____
 FIRE MARSHAL FEES \$ _____
 FIXTURE UNITS _____ PLAN LOC. J R

APPROVED FOR ISSUANCE OF BUILDING PERMIT
 (LOG OUT) Ch DATE 10-27-4
 BY _____

ZONING REVIEW
 USE SFD
 ZONING DISTRICT R3 HISTORICAL DISTRICT _____
 ZONING CASE # _____
 GROSS FLOOR AREA OF TENANT SPACE _____

YARDS:	GARAGE	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
FRONT <u>37</u>	OPTIONS	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
FRONT <u>13</u>	REMARKS	<u>Build 2-story RSmt 1st floor addition. 10ft- no wellbse no and kitchen; 2nd floor addition</u>		
L SIDE <u>14</u>				
REAR <u>60</u>				

GRADING AND DRAINAGE REVIEW front footer addition
 SOILS # 46 A B C
 AREA TO BE DISTURBED (TOTAL SQ FT THIS PERMIT) 2,500 sq ft
 IMPERVIOUS AREA (TOTAL SQ FT THIS PERMIT) 506 sq ft
 PLAN # _____ APPR. DATE _____

STAMPS
DP-WP/FF/2500 6x11H
 (See reverse side of application)
REMARKS * plat Attachment

Any and all information and/or stamps on the reverse side of this form are a part of this application and must be complied with. I hereby certify that I have authority of the owner to make this application, that the information is complete and correct, and that the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations which relate to the property.

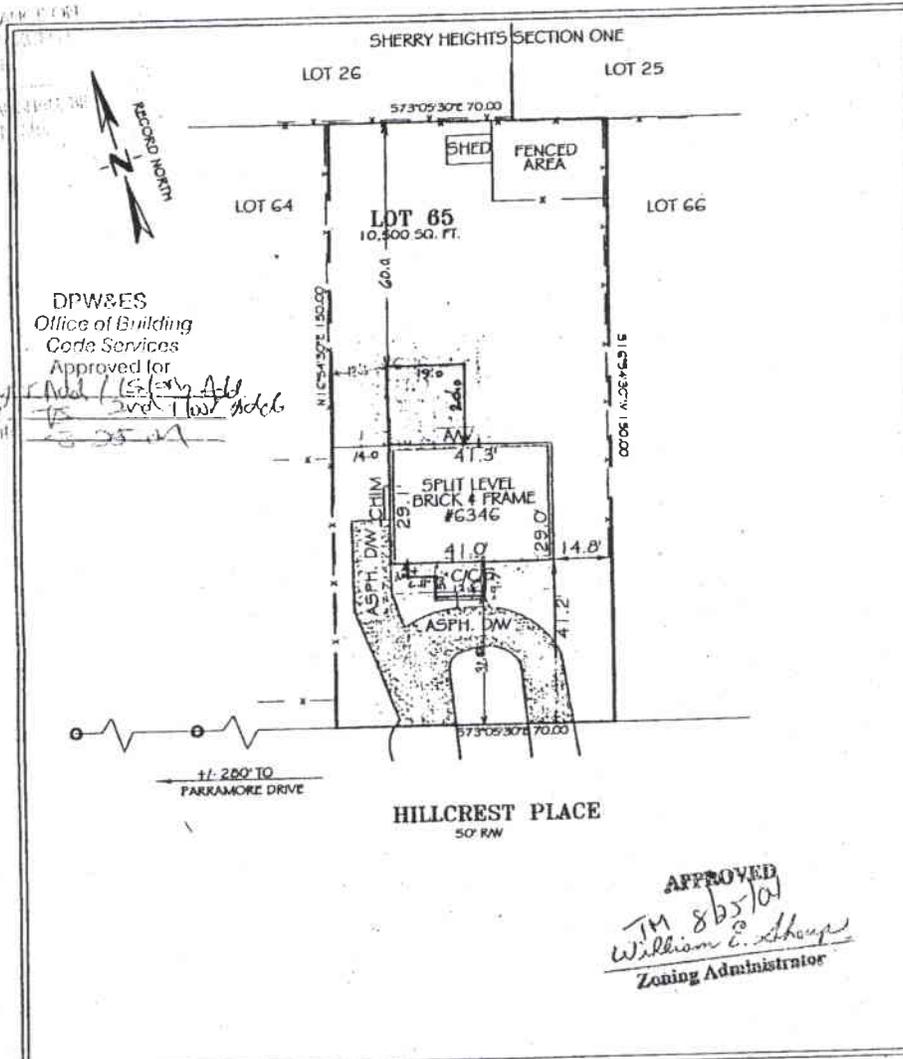
Signature of Owner or Agent Phu Thi Nguyen Date 08/10/04
PHU THI NGUYEN
 Printed Name and Title
 (Notarization of signature is required if owner is listed as the contractor and is not present at time of application)

NOTARIZATION (if required) VA
 State (or territory or district) of _____
 County (or city) of ARLINGTON to wit: THAO TON
 Notary Public in the State and County aforesaid, do certify that PHU THI NGUYEN
 whose name is signed to this application, appeared before me in the State and County aforesaid and executed this affidavit.
 Given under my hand this 11th day of AUG, 2004
 commission expires the 30th day of APRIL, 2007
Thao Ton
 (Notary Signature)

DAMP PROOFING/WATERPROOFING
REQUIRED IN ACCORDANCE WITH
BUILDING CODES

FOOTINGS AND PIERS MUST BE
PLACED ON COMPETENT MATERIAL.

TRIAL ENCL. ENCLOSURE
THIS FOR MEAS. BENCH
ENCLOSURE BENCH
BENCH BENCH

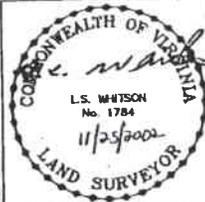


DPW&ES
Office of Building
Code Services
Approved for
By: *[Signature]*
Date: 11/25/02

APPROVED
[Signature]
William C. Schaepe
Zoning Administrator

HOUSE LOCATION SURVEY

LOT 65
LINCOLNIA HEIGHTS
DEED BOOK 440 PAGE 442
FAIRFAX COUNTY, VIRGINIA
DATE: NOVEMBER 25, 2002
SCALE: 1" = 30'



LEGEND

- CW = CONC WALK
- SW = STONE WALK
- WL = WOOD LANDING
- BL = BRICK LANDING
- WD = WOOD DECK
- CS = CONC STOOP
- MS = METAL STOOP
- CIGS = COVERED CONC STOOP
- CP = CONC PATIO
- RE = RECESSED ENTRY
- CHIM = CHIMNEY
- O.H. = OVERHANG
- BW = BAY WINDOW
- OHW = OVERHEAD WIRE
- AW = AREA WAY
- O = IRON PIPE
- x- = FENCE

NOTES

THIS PLAT DOES NOT REPRESENT A BOUNDARY SURVEY; IT IS A HOUSE LOCATION SURVEY. ANY MONUMENTS SHOWN ON THIS PLAT WERE RECOVERED IN THE FIELD AND DEEMED SUFFICIENT FOR A HOUSE LOCATION SURVEY. THIS PLAT DOES NOT CERTIFY THAT THE LOCATIONS OF THESE MONUMENTS ARE PRECISELY CORRECT. YOUR LEADER REQUIRED A HOUSE LOCATION SURVEY TO VERIFY THE ORIENTATION OF THE HOUSE, LOCATION OF IMPROVEMENTS, AND TO ENSURE THAT THERE ARE NO IMPROPER ENCUMBRANCES UPON THE PROPERTY. IF THE OWNER DESIRES THE PRECISE LOCATION OF CORNERS TO BE MARKED, THEN A BOUNDARY SURVEY MAY BE REQUESTED FOR AN ADDITIONAL FEE. THE LOCATION OF FENCES, DRIVEWAYS, AND OTHER IMPROVEMENTS ARE APPROXIMATE. THIS PLAT DOES NOT DETERMINE THE OWNERSHIP OF FENCES. THIS PLAT IS NOT TO BE USED FOR THE CONSTRUCTION OF FENCES OR ANY OTHER IMPROVEMENTS. THIS PLAT WAS ESTABLISHED BY TRANSIT AND TAPE. NO TITLE REPORT WAS FURNISHED.

SAM WHITSON, L.S./LAND SURVEYING
11170 LEE HIGHWAY SUITE C
FAIRFAX, VIRGINIA 22030
(703)352-9516 FAX: (703)352-9516

OWNER: NGUYEN

BUYER: LE

W.O. #02-8448

CLIENT #02-11028



Fairfax County, Virginia

BUILDING PERMIT

PLUMBING/GAS RESIDENTIAL

Permit Number: 142580181
Parent Permit: 142580177

Issued Date: 09/16/2014
Tax Map ID: 072-1 / 07 / / 0065

Job Address: 6346 Hillcrest Pl
Alexandria, VA 22312-1234

Plan No.: N/A

Owner/Tenant:
SUAZNABAR MARIA
6346 Hillcrest Pl
Alexandria, Va 22312
(703)474-6467

Contractor:
OWNER IS CONTRACTOR

Structure: SINGLE FAMILY DWELLING

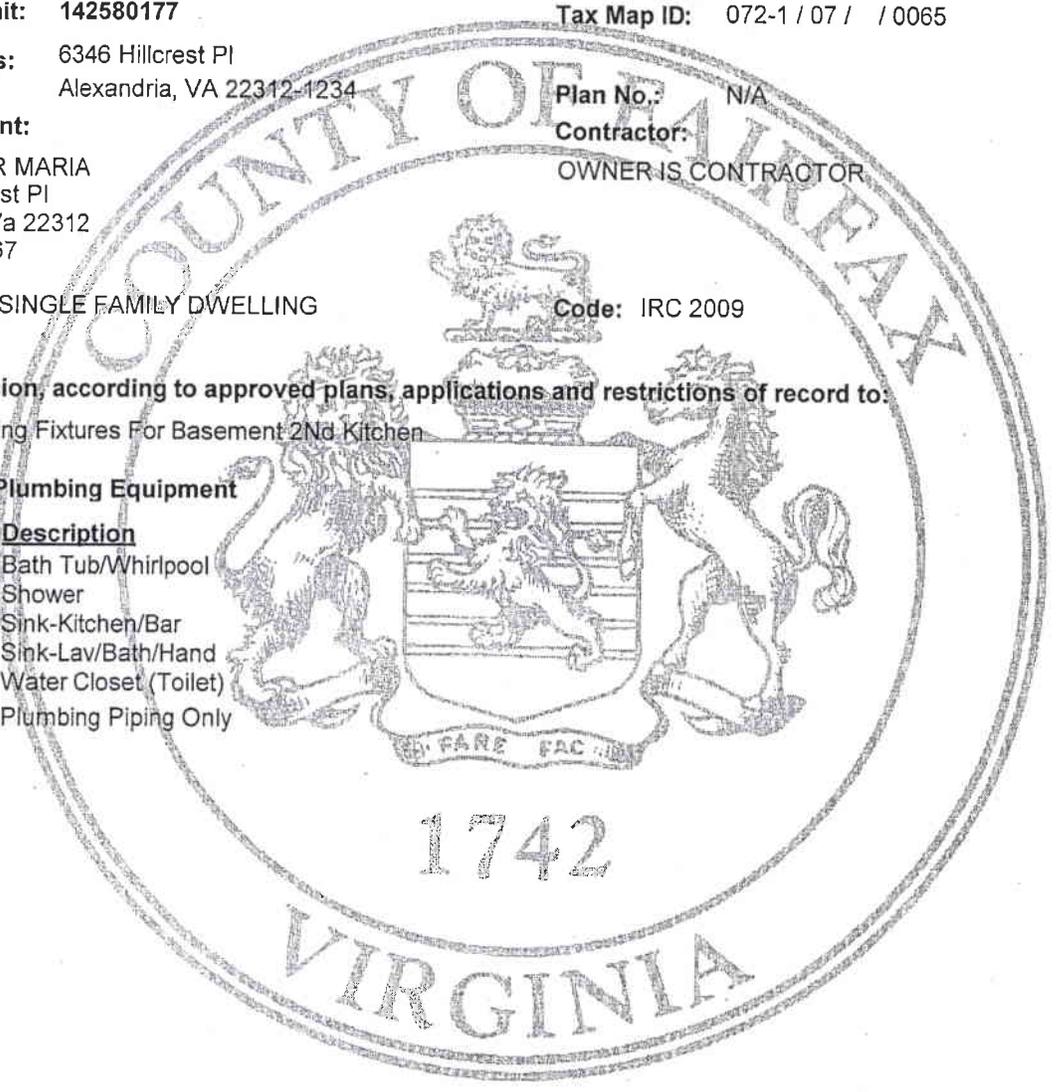
Code: IRC 2009

Has permission, according to approved plans, applications and restrictions of record to:

Install Plumbing Fixtures For Basement 2Nd Kitchen

Residential Plumbing Equipment

Quantity	Description
1	Bath Tub/Whirlpool
1	Shower
1	Sink-Kitchen/Bar
1	Sink-Lav/Bath/Hand
1	Water Closet (Toilet)
1	Plumbing Piping Only



BUILDING OFFICIAL

- A copy of this building permit must be posted at the construction site for the duration of the permit.
- This permit does not constitute approval from your homeowners' association and its related covenants.
- This permit will expire if work does not commence in six months or if work is suspended for six months.
- The permit holder is responsible for contacting the county when stages of construction are reached that require inspections. To schedule inspections call our inspections office at 703-631-5101, TTY 711 during business hours or our automated inspection system at 703-222-2474. Inspections may also be scheduled online at www.fairfaxcounty.gov/fido.
- For questions regarding this permit call the Permit Application Center at 703-222-0801, TTY 711.
- Call Miss Utility before you dig at 811.



Fairfax County, Virginia

BUILDING PERMIT

ELECTRIC RESIDENTIAL

Permit Number: 142580180

Issued Date: 09/16/2014

Parent Permit: 142580177

Tax Map ID: 072-1 / 07 / / 0065

Job Address: 6346 Hillcrest Pl
Alexandria, VA 22312-1234

Owner/Tenant:

SUAZNABAR MARIA
6346 Hillcrest Pl
Alexandria, Va 22312

Contractor:

OWNER IS CONTRACTOR

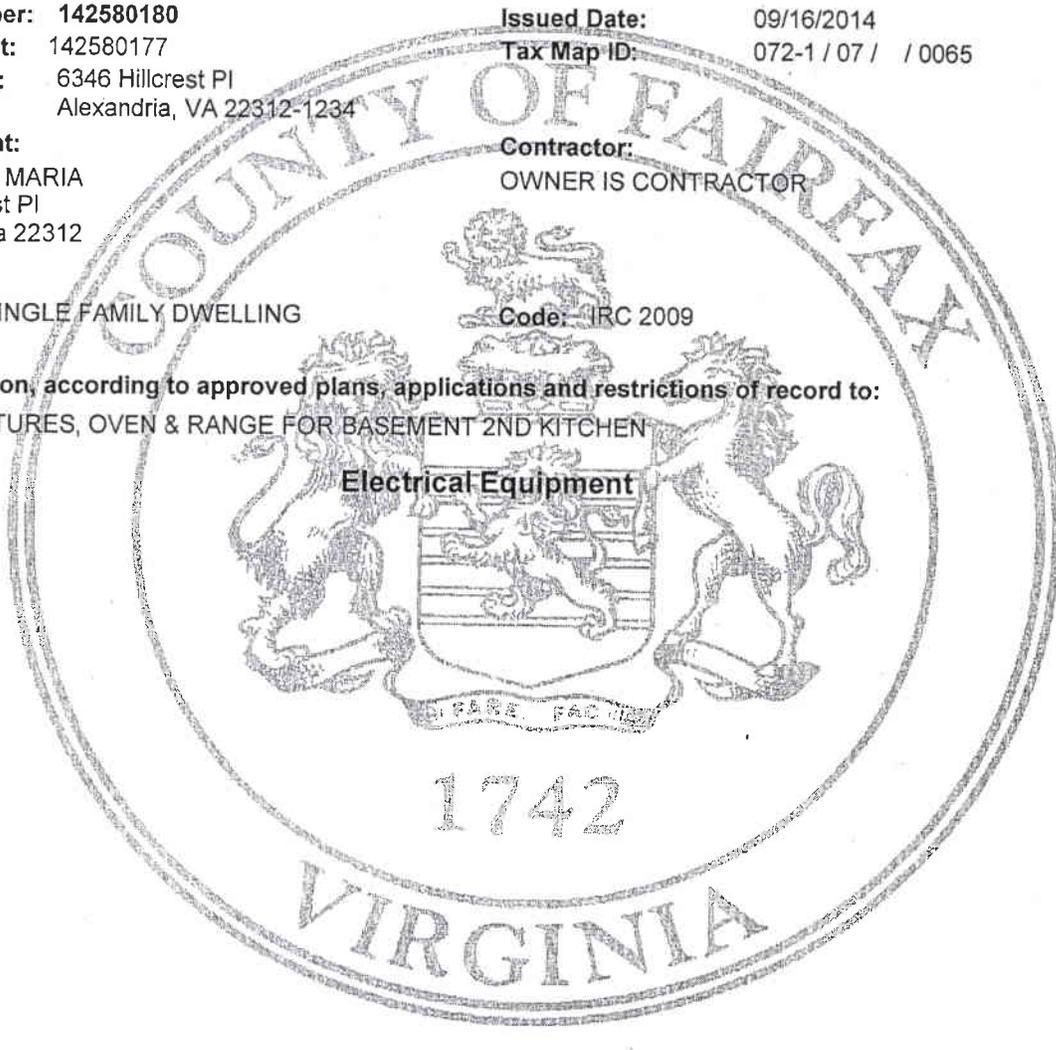
Structure: SINGLE FAMILY DWELLING

Code: IRC 2009

Has permission, according to approved plans, applications and restrictions of record to:
INSTALL FIXTURES, OVEN & RANGE FOR BASEMENT 2ND KITCHEN

Electrical Equipment

- 15 Fixtures
- 1 Oven
- 1 Range



BUILDING OFFICIAL

- A copy of this building permit must be posted at the construction site for the duration of the permit.
- This permit does not constitute approval from your homeowners' association and its related covenants.
- This permit will expire if work does not commence in six months or if work is suspended for six months.
- The permit holder is responsible for contacting the county when stages of construction are reached that require inspections. To schedule inspections call our inspections office at **703-631-5101, TTY 711** during business hours or our automated inspection system at **703-222-2474**. Inspections may also be scheduled online at www.fairfaxcounty.gov/fido.
- For questions regarding this permit call the Permit Application Center at **703-222-0801, TTY 711**.
- Call Miss Utility before you dig at **811**.



Fairfax County, Virginia

BUILDING PERMIT

INTERIOR ALT. RESIDENTIAL

Permit Number: 142580177

Issued Date: 09/16/2014

Tax Map ID: 072-1 / 07 / / 0065

Job Address: 6346 Hillcrest Pl
Alexandria, VA 22312-1234

Plan No.: W-14-4685

Owner/Tenant:

SUAZNABAR MARIA
6346 Hillcrest Pl
Alexandria, Va 22312

Contractor:

OWNER IS CONTRACTOR

Mechanic's Lien Agent: None Designated

Structure: SINGLE FAMILY DWELLING

Code: IRC 2009

Group: R5

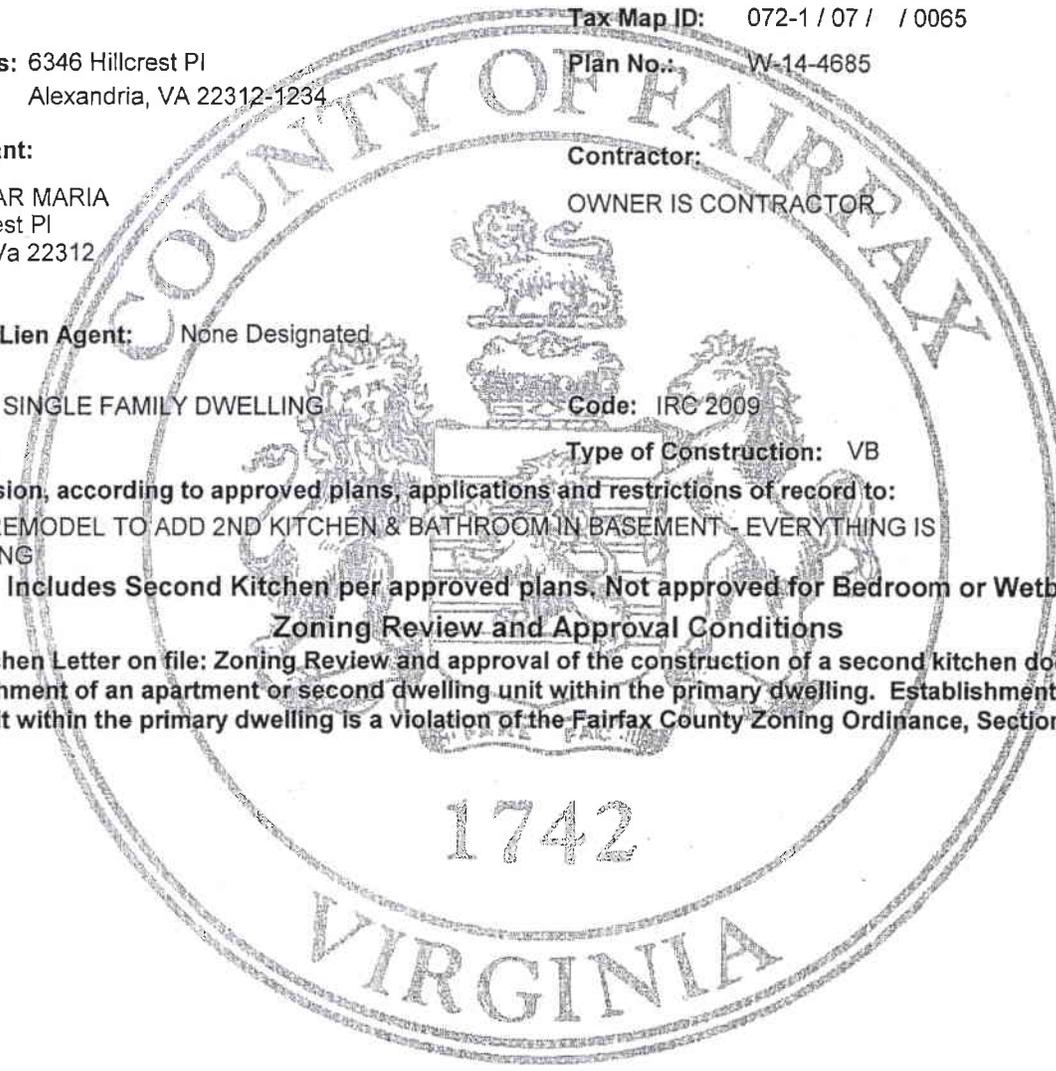
Type of Construction: VB

Has permission, according to approved plans, applications and restrictions of record to:
INTERIOR REMODEL TO ADD 2ND KITCHEN & BATHROOM IN BASEMENT - EVERYTHING IS
PRE-EXISTING

Includes Second Kitchen per approved plans. Not approved for Bedroom or Wetbar.

Zoning Review and Approval Conditions

Second Kitchen Letter on file: Zoning Review and approval of the construction of a second kitchen does not constitute the establishment of an apartment or second dwelling unit within the primary dwelling. Establishment of a dwelling unit within the primary dwelling is a violation of the Fairfax County Zoning Ordinance, Section 2-5



BUILDING OFFICIAL

- A copy of this building permit must be posted at the construction site for the duration of the permit.
- This permit does not constitute approval from your homeowners' association and its related covenants.
- This permit will expire if work does not commence in six months or if work is suspended for six months.
- The permit holder is responsible for contacting the county when stages of construction are reached that require inspections. To schedule inspections call our inspections office at **703-631-5101, TTY 711** during business hours or our automated inspection system at **703-222-2474**. Inspections may also be scheduled online at www.fairfaxcounty.gov/fido.
- For questions regarding this permit call the Permit Application Center at **703-222-0801, TTY 711**.
- Call Miss Utility before you dig at **811**.

Virginia.gov Agencies | Governor Search Virginia.Gov

VIRGINIA DEPARTMENT OF SOCIAL SERVICES

HOME ABOUT US ABUSE & NEGLECT ADOPTION & FOSTER CARE ADULT & CHILD CARE ASSISTANCE COMMUNITY SUPPORT CHILD SUPPORT CAREERS

Adult & Child Care ↑ Search for Child Day Care
 Child Care ↑
 Child Day Care ↑ [Return to Search Results](#) | [New Search](#) |
 Search for Child Day Care → **Karina Suaznabar**
 6346 Hillcrest Pl.
 ALEXANDRIA, VA 22312
 (703) 750-0608
 Certified Preschools (CP) →
 Child Day Centers (CDC) →
 Family Day Homes (FDH) → Facility Type: [Family Day Home](#)
 License Type: [One Year](#)
 Expiration Date: April 8, 2015
 Family Day System (FDS)/Homes → Business Hours: 7:00am - 6:00pm
 Monday - Friday
 Religiously Exempt Child Day Centers (RECDC) → Capacity: 12
 Ages: 2 months - 12 years 11 months
 Voluntarily Registered Family Day Homes (VRFDH) → Inspector: Colleen Bray
 (703) 359-6704

CPR, AED, and Basic First Aid Certification Card
 Vicente Chavez
 042014 042016
 703-568-4686
 American Safety Health Institute

FAMILY DAY HOME LICENSE
 Issued to: Karina I. Suaznabar, d.b.a. Melody Day Care
 Address: 6346 Hillcrest Place, Alexandria, Virginia 22312
 This license is issued in accordance with provisions of Chapters 1, 17 and 18, Title 63.2, Code of Virginia and other relevant laws, the regulations of the State Board of Social Services and the specific limitations prescribed by the Commissioner of Social Services as follows:

CAPACITY	
12	
GENDER	AGE
Both	2 months through 12 years

This license is not transferable and will be in effect April 9, 2014 through April 8, 2015 unless revoked for violation of law or failure to comply with the limitations stated above.

ISSUING OFFICE:
 Virginia Department of Social Services
 Division of Licensing - Fairfax Licensing Office
 2781 Powers Drive, Suite 125
 Fairfax, VA 22030
 Telephone: (703) 934-1004

MARGARET ROSS SCHULTZE
 COMMISSIONER OF SOCIAL SERVICES
 By: *James J. Farrell*
 Title: LICENSING ADMINISTRATOR
 Date: April 15, 2014

This recognizes that **Laura Siles-Suaznabar** has completed the requirements for **Child CPR** conducted by **American Red Cross of the National Capital Area**



MEMORANDUM

Date: August 18, 2016

To: Mary Ann Tsai
Zoning Evaluation Division
Fairfax County Department of Planning and Zoning

From: Dawn Curry
Senior Zoning Inspector
Zoning Inspection Branch

Subject: Home Child Care Inspection

Applicant: Karina Suaznabar – Melody Daycare
6346 Hillcrest Place, Alexandria, Virginia 22312
Lincolnia Heights, LT 65 Tax Map# 72-1 ((07 0065
Zoning District: R-3(Residential 3 DU/AC) Magisterial District: Mason
Mail Log # 2014-0339
Date of Inspection: August 15, 2014

KEY: A "✓" mark in a box indicates that the item was deficient. An unmarked box indicates that no violation was found.

Rooms used for sleeping must provide two means of exit, one which leads directly to the outside, as required by the Virginia Uniform Statewide Building Code. (32-12-30.)

Egress window sill exceeds the minimum height of 44"

An operable smoke alarm shall be provided outside of each sleeping area, with at least one such device on each floor.

All exit stairs, interior or exterior, shall be in good repair and shall be provided with handrails and guard rails as required by the Virginia Uniform Statewide Building Code.

- All egress pathway and exit doors shall be unlocked in the direction of egress and free from obstructions that would prevent their use, including debris, storage, and accumulations of snow and ice.
- Electrical hazards identified shall be abated in accordance with the Virginia Uniform Statewide Building Code.
- Extension cords, temporary wiring, and flexible cords shall not be substituted for permanent wiring. Extension cords and flexible cords shall not be affixed to structures, extended through walls, ceilings, or floors, or under doors or floor coverings, or be subject to environmental or physical damage.
- A working space of not less than 30 inches in width, 36 inches in depth, and 78 inches in height shall be provided in front of the electrical service equipment. Where the electrical service equipment is wider than 30 inches, the working space shall not be less than the width of the equipment. No storage of any materials shall be located within the designated working space.
- Structures comply with the Zoning Ordinance.

ZONING ORDINANCE PROVISIONS

8-006 General Standards

In addition to the specific standards set forth hereinafter with regard to particular special permit uses, all special permit uses shall satisfy the following general standards:

1. The proposed use at the specified location shall be in harmony with the adopted comprehensive plan.
2. The proposed use shall be in harmony with the general purpose and intent of the applicable zoning district regulations.
3. The proposed use shall be such that it will be harmonious with and will not adversely affect the use or development of neighboring properties in accordance with the applicable zoning district regulations and the adopted comprehensive plan. The location, size and height of buildings, structures, walls and fences, and the nature and extent of screening, buffering and landscaping shall be such that the use will not hinder or discourage the appropriate development and use of adjacent or nearby land and/or buildings or impair the value thereof.
4. The proposed use shall be such that pedestrian and vehicular traffic associated with such use will not be hazardous or conflict with the existing and anticipated traffic in the neighborhood.
5. In addition to the standards which may be set forth in this Article for a particular group or use, the BZA shall require landscaping and screening in accordance with the provisions of Article 13.
6. Open space shall be provided in an amount equivalent to that specified for the zoning district in which the proposed use is located.
7. Adequate utility, drainage, parking, loading and other necessary facilities to serve the proposed use shall be provided. Parking and loading requirements shall be in accordance with the provisions of Article 11.
8. Signs shall be regulated by the provisions of Article 12; however, the BZA, under the authority presented in Sect. 007 below, may impose more strict requirements for a given use than those set forth in this Ordinance.

8-303 Standards for all Group 3 Uses

In addition to the general standards set forth in Sect. 006 above, all Group 3 special permit uses shall satisfy the following standards:

1. Except as may be qualified in the following Sections, all uses shall comply with the lot size and bulk regulations of the zoning district in which located; however, subject to the provisions of Sect. 9-607, the maximum building height for a Group 3 use may be increased.
2. All uses shall comply with the performance standards specified for the zoning district in which located.

3. Before establishment, all uses, including modifications or alterations to existing uses, except home child care facilities, shall be subject to the provisions of Article 17, Site Plans.

8-305 Additional Standards for Home Child Care Facilities

1. The number of children that may be cared for in a home child care facility may exceed the number of children permitted under Par. 6A of Sect. 10-103, but in no event shall the maximum number of children permitted at any one time exceed twelve (12), excluding the provider's own children. The BZA may also allow more than one nonresident person to be involved with the use. Except as described above, home child care facilities shall also be subject to the use limitations of Par. 6 of Sect. 10-103.
2. The BZA shall review access to the site and all existing and/or proposed parking, including but not limited to the availability of on-street parking and/or alternative drop off and pick up areas located in proximity to the use, to determine if such parking is sufficient. The BZA may require the provision of additional off-street parking spaces based on the maximum number of vehicles expected to be on site at any one time and such parking shall be in addition to the requirement for the dwelling unit.
3. The provisions of Article 13 shall not apply to home child care facilities, however, the BZA may require the provision of landscaping and screening based on the specifics of each application.
4. Notwithstanding Par. 2 of Sect. 011 above, all applications shall be accompanied by ten (10) copies of a plan drawn to scale. The plan, which may be prepared by the applicant, shall contain the following information:
 - A. The dimensions, boundary lines and area of the lot or parcel.
 - B. The location, dimensions and height of any building, structure or addition, whether existing or proposed.
 - C. The distance from all property lines to the existing or proposed building, structure or addition, shown to the nearest foot.
 - D. The dimensions and size of all outdoor recreation space and the location of such space in relation to all lot lines.
5. All such uses shall be subject to the regulations of Chapter 30 of The Code or Title 63.2, Chapter 17 of the Code of Virginia.

10-103 Use Limitations

6. The following use limitations shall apply to home child care facilities:
 - A. The maximum number of children permitted at any one time shall be as follows:
 - (1) Seven (7) when such facility is located in a single family detached dwelling.
 - (2) Five (5) when such facility is located in a single family attached, multiple family or mobile home dwelling.

The maximum number of children specified above shall not include the provider's own children.

- B. A home child care facility shall be operated by the licensed or permitted home child care provider within the dwelling that is the primary residence of such provider, and except for emergency situations, such provider shall be on the premises while the home child care facility is in operation. Notwithstanding the above, a substitute care provider may operate a home child care facility in the absence of the provider for a maximum of 240 hours per calendar year.
- C. There shall be no exterior evidence, including signs, that the property is used in any way other than as a dwelling, except that play equipment and other accessory uses and structures permitted by this Part shall be allowed.
- D. In addition to the persons who use the dwelling as their primary residence, one (1) nonresident person, whether paid or not for their services, may be involved in the home child care use on the property, provided that there is only one (1) such person on the property at any one time and the hours of such attendance shall be limited to 7:00 AM to 6:00 PM, Monday through Friday.
- E. Notwithstanding the provisions of Par. B above, a child care provider may care for the maximum number of children permitted in Par. A above in a dwelling other than the provider's own, as long as the dwelling is the primary residence of at least one of the children being cared for by the provider. Such child care provider shall comprise the one nonresident person allowed under Par. D above.
- F. All such uses shall be subject to the regulations of Chapter 30 of The Code or Title 63.2, Chapter 17 of the Code of Virginia.
- G. An increase in the number of children permitted under Par. A above or the involvement of more than one nonresident person as permitted under Par. D above may be permitted in accordance with the provisions of Part 3 of Article 8.